

DISCLAIMER

The following is a preliminary report of actions taken by the House of Delegates at its June 2021 Special Meeting and should not be considered final. Only the Official Proceedings of the House of Delegates reflect official policy of the Association.

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES (JUN-21)

Report of Reference Committee F

Michael D. Chafty, MD, JD, Chair

1 Your Reference Committee recommends the following consent calendar for acceptance:

2
3 **RECOMMENDED FOR ADOPTION**

- 4
5 1. Board of Trustees Report 3 – AMA 2022 Dues
6
7 2. Board of Trustees Report 12 – Adopting the Use of the Most Recent and
8 Updated Edition of the AMA Guides to the Evaluation of Permanent Impairment
9
10 3. Council on Constitution and Bylaws / Council on Long Range Planning and
11 Development Report 1 – Joint Council Sunset Review of 2011 House Policies
12

13 **RECOMMENDED FOR ADOPTION AS AMENDED**

- 14
15 4. Resolution 602 – Timely Promotion and Assistance in Advance Care Planning
16 and Advance Directives
17

18 **RECOMMENDED FOR ADOPTION IN LIEU OF**

- 19
20 5. Resolution 608 – Sharing Covid-19 Resources
21 Resolution 609 – COVID-19 Crisis in Asia
22 Resolution 610 – Promoting Equity in Global Vaccine Distribution
23 Resolution 611 – Covid-19 Crisis in India
24

25 **RECOMMENDED FOR NOT ADOPTION**

- 26
27 6. Resolution 601 – \$100 Member Annual Dues Payment Through 2023
28

29 **RECOMMENDED FOR FILING**

- 30
31 7. Board of Trustees Report 1 – Annual Report

Amendments

If you wish to propose an amendment to an item of business, click here: [Submit New Amendment](#)

RECOMMENDED FOR ADOPTION

(1) BOARD OF TRUSTEES REPORT 3 - AMA 2022 DUES

RECOMMENDATION:

Recommendation in Board of Trustees Report 3 be adopted and the remainder of the Report be filed.

HOD ACTION: Recommendation in Board of Trustees Report 3 adopted and the remainder of the Report filed.

The Board of Trustees recommends no change to the dues levels for 2022, 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

(Directive to Take Action)

Your Reference Committee received no testimony in response to Board of Trustees Report 3.

Our AMA Board of Trustees is recommending no changes from prior years in the 2022 standard dues rates and highlighted that the last time our AMA raised dues was in 1994. It was stated that had our AMA adjusted dues over the past 27 years to remain on pace with inflation, current annual dues for regular members would be \$725.

(2) BOARD OF TRUSTEES REPORT 12 – ADOPTING THE USE OF THE MOST RECENT AND UPDATED EDITION OF THE AMA GUIDES TO THE EVALUATION OF PERMANENT IMPAIRMENT

RECOMMENDATION:

Recommendation in Board of Trustees Report 12 be adopted and the remainder of the Report be filed.

HOD ACTION: Recommendation in Board of Trustees Report 12 adopted and the remainder of the Report filed.

Amendments

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1
2 The Board of Trustees recommends that the following policy be adopted in lieu of
3 Resolution 606-NOV-20 and the remainder of this report be filed:

4
5 Support for the Use of the Most Recent and Updated Edition of the *AMA Guides*
6 *to the Evaluation of Permanent Impairment*.

7
8 Our American Medical Association supports the adoption of the most current
9 edition of the *AMA Guides to the Evaluation of Permanent Impairment* by all
10 jurisdictions to provide fair and consistent impairment evaluations for patients and
11 claimants including injured workers. (New HOD Policy)

12
13 Testimony received for Board of Trustees Report 12 was limited, but largely favorable.

14
15 Our AMA Board of Trustees testified that the report speaks to the fact that the AMA Guides
16 previously were published at inconsistent intervals and typically involved significant
17 changes to methodology. They were last updated in 2008 when the 6th edition was
18 released, though some states have elected to continue use of outdated medicine in older
19 editions of the AMA Guides for convenience, ease of use, or political/economic
20 expedience. The report also highlights our AMA's establishment of a new editorial panel
21 and process that support ongoing incremental improvement to the AMA Guides.

22
23 Some opposing views indicated that the AMA Guides are not peer-reviewed; however,
24 your Reference Committee notes that the resource is peer-created. Additionally, some
25 speakers favored flexibility on which edition to use and advocated for freedom of choice.
26 To address this concern, your Reference Committee believes it would be beneficial to
27 provide electronic access to older versions of the AMA Guides to facilitate flexibility in use.

28
29
30 (3) JOINT REPORT OF THE COUNCIL ON CONSTITUTION
31 AND BYLAWS AND THE COUNCIL ON LONG RANGE
32 PLANNING AND DEVELOPMENT REPORT 1 – JOINT
33 COUNCIL SUNSET REVIEW OF 2011 HOUSE POLICIES

34
35 **RECOMMENDATION:**

36
37 **Recommendation in Joint Report of the Council on**
38 **Constitution and Bylaws and the Council on Long**
39 **Range Planning and Development Report 1 be adopted**
40 **and the remainder of the Report be filed.**

41
42 **HOD ACTION: Recommendation in Joint Report of the**
43 **Council on Constitution and Bylaws and the Council on**
44 **Long Range Planning and Development Report 1 adopted**
45 **and the remainder of the Report filed.**

46 The Councils on Constitution and Bylaws and Long Range Planning and Development
47 recommend that the House of Delegates policies that are listed in the appendix to this
48 report be acted upon in the manner indicated and the remainder of this report be filed.

Amendments

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1
2 Your Reference Committee wishes to extend its appreciation to the Councils on
3 Constitution and Bylaws and Long Range Planning and Development for their report.
4 Having received no testimony in response to the report, your Reference Committee
5 supports the Councils' recommendations.

Amendments

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RECOMMENDED FOR ADOPTION AS AMENDED

- 1
2
3 (4) RESOLUTION 602 – TIMELY PROMOTION AND
4 ASSISTANCE IN ADVANCE CARE PLANNING AND
5 ADVANCE DIRECTIVES
6

7 **RECOMMENDATION A:**
8

9 **Resolution 602 be amended by addition and deletion to**
10 **read as follows:**
11

12 **RESOLVED, That our American Medical Association**
13 **begin a low cost in-house educational effort aimed at**
14 **physicians, to include relevant billing and**
15 **reimbursement information, encouraging physicians to**
16 **lead by example and complete their own advance**
17 **directives (Directive to Take Action); and be it further**
18

19 **RESOLVED, That our AMA encourage practicing**
20 **physicians to voluntarily publicize the fact of having**
21 **executed our own advance directives, and to share**
22 **readily available educational materials regarding the**
23 **importance and components of advance directives in**
24 **offices and on practice websites, as a way of starting**
25 **the conversation with patients and families (Modify**
26 **Current HOD Policy); and be it further**
27

28 **RESOLVED, That our AMA strongly encourage all**
29 **primary care physicians of relevant specialties**
30 **providing primary or/and advanced illness care to**
31 **include advance care planning as a routine part of their**
32 **adult-patient care protocols when indicated, and also to**
33 **include including advance directive documentation in**
34 **patients' medical records (including electronic medical**
35 **records), as a suggested standard health maintenance**
36 **practice (Modify Current HOD Policy); and be it further**
37

38 **RESOLVED, That our AMA collaborate (prioritized and**
39 **made more urgent by the ongoing COVID-19 pandemic)**
40 **with stakeholder groups, such as legal, medical,**
41 **hospital, medical education, and faith-based**
42 **communities as well as interested citizens, to promote**
43 **completion of advance directives by all individuals who**
44 **are of legal age and competent to make healthcare**
45 **decisions, and to promote the adoption and use of**
46 **electronic systems to make patients' advance**
47 **directives readily available to treatment teams**
48 **regardless of location (Directive to Take Action); and be**
49 **it further**

Amendments

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1
2 **RESOLVED, That our AMA actively promote the**
3 **officially recognized designation of April 16 as National**
4 **Healthcare Decisions Day. (New HOD Policy)**
5

6 **RECOMMENDATION B:**

7
8 **Resolution 602 be adopted as amended.**
9

10 **HOD ACTION: Resolution 602 adopted as amended**
11

12 RESOLVED, That our American Medical Association begin a low cost in-house
13 educational effort aimed at physicians, to include relevant billing and reimbursement
14 information, encouraging physicians to lead by example and complete their own advance
15 directives (Directive to Take Action); and be it further
16

17 RESOLVED, That our AMA encourage practicing physicians to voluntarily publicize the
18 fact of having executed our own advance directives, and to share readily available
19 educational materials regarding the importance and components of advance directives in
20 offices and on practice websites, as a way of starting the conversation with patients and
21 families (Modify Current HOD Policy); and be it further
22

23 RESOLVED, That our AMA strongly encourage all primary care physicians to include
24 advance care planning as a routine part of their adult patient care protocols, and also to
25 include advance directive documentation in patients' medical records as a suggested
26 standard health maintenance practice (Modify Current HOD Policy); and be it further
27

28 RESOLVED, That our AMA collaborate (prioritized and made more urgent by the ongoing
29 COVID-19 pandemic) with stakeholder groups, such as legal, medical, hospital, medical
30 education, and faith-based communities as well as interested citizens, to promote
31 completion of advance directives by all individuals who are of legal age and competent to
32 make healthcare decisions (Directive to Take Action); and be it further
33

34 RESOLVED, That our AMA actively promote the officially recognized designation of April
35 16 as National Healthcare Decisions Day. (New HOD Policy)
36

37 Testimony received for Resolution 602 was overwhelmingly supportive. Speakers noted
38 that physicians, family members, and caregivers often face an ethical dilemma when the
39 patient is unable to communicate their wishes for medical treatment. The COVID-19
40 pandemic has underscored the need for advance directives, particularly in light of hospital
41 isolation requirements.
42

43 Further, testimony noted that advance care planning should not be limited to adult patients
44 as there may be instances when an advanced directive for pediatric patients may be
45 required. Speakers also noted that physicians of varying specialties, in addition to primary
46 care physicians, could be instrumental in advising their patients on preparing advanced
47 directives.

Amendments

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- 1 Additionally, testimony supported the use of electronic systems (e.g., electronic medical
- 2 records, cloud-based storage, etc.) to make advance directives more readily available.
- 3 Your Reference Committee concurs and recommends that Resolution 602 be adopted as
- 4 amended.

Amendments

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RECOMMENDED FOR ADOPTION IN LIEU OF

(5) RESOLUTION 608 – SHARING COVID-19 RESOURCES

RECOMMENDATION:

Alternate Resolution 608 be adopted in lieu of Resolutions 608, 609, 610, and 611.

HOD ACTION: Alternate Resolution 608 adopted in lieu of Resolutions 608, 609, 610, and 611.

**PROMOTING EQUITABLE RESOURCE DISTRIBUTION
GLOBALLY IN RESPONSE TO THE COVID-19
PANDEMIC**

RESOLVED, That our AMA, in an effort to improve public health and national stability, explore possible assistance through the COVID-19 Vaccines Global Access (COVAX) initiative co-led by the World Health Organization, Gavi, and the Coalition for Epidemic Preparedness Innovations, as well as all other relevant organizations, for residents of countries with limited financial or technological resources ~~where the cases of COVID-19 infection have been exponentially increasing~~ (Directive to Take Action); and be it further

RESOLVED, That our AMA will work with governmental and appropriate regulatory bodies to encourage prioritization of equity when providing COVID-19 pandemic-related resources, such as diagnostics, low cost or free medications, therapeutics, vaccines, raw materials for vaccine production, personal protective equipment, and/or financial support (Directive to Take Action); and be it further

RESOLVED, That our AMA recognize the extraordinary efforts of many dedicated physicians, physician and ethnic organizations assisting in this humanitarian COVID-19 pandemic crisis. (Directive to Take Action)

RESOLVED, That our AMA support World Health Organization (WHO) efforts and initiatives to increase production and distribution of therapeutics and vaccines necessary to combat COVID-19 and future pandemics in order to provide vaccine doses to low- and middle-income countries with limited access, including:

Amendments

If you wish to propose an amendment to an item of business, click here: [Submit New Amendment](#)

- 1 **1. A temporary waiver of the Trade Related Aspects**
- 2 **of Intellectual Property (TRIPS) agreement and**
- 3 **other relevant intellectual property protections;**
- 4
- 5 **2. Technological transfers relevant for vaccine**
- 6 **production;**
- 7
- 8 **3. Other support, financial and otherwise,**
- 9 **necessary to scale up global vaccine**
- 10 **manufacturing;**
- 11
- 12 **4. Measures that ensure the safety and efficacy of**
- 13 **products manufactured by such means.**
- 14

15 Resolution 608

16 RESOLVED, That our American Medical Association call for the cooperation of all
17 governments and international agencies to share data, research and resources for the
18 production and distribution of medicines, vaccines and personal protective equipment
19 (Directive to Take Action); and be it further

20
21 RESOLVED, That our AMA promote and support efforts to supply COVID vaccines to
22 health care agencies in other parts of the world to be administered to individuals who can't
23 afford them. (Directive to Take Action)

24
25
26 Resolution 609

27 RESOLVED, That our American Medical Association urge the U.S. government to provide
28 all possible assistance including surplus vaccines and vaccines that have not had
29 emergency use authorization to the citizens of India and other countries in a similar
30 situation in this humanitarian crisis (New HOD Policy); and be it further

31
32 RESOLVED, That our AMA advocate for all possible assistance through WMA and WHO
33 for government and the citizens of India and other countries in a similar situation (Directive
34 to Take Action); and be it further

35
36 RESOLVED, That our AMA recognize the extraordinary efforts of many dedicated
37 physicians and ethnic organizations assisting in this humanitarian crisis. (New HOD
38 Policy)

39

Amendments

If you wish to propose an amendment to an item of business, click here: [Submit New Amendment](#)

1 Resolution 610

2 RESOLVED, That our AMA amend policy H-250.988, "Low Cost Drugs to Poor Countries
3 during Times of Pandemic Health Crises," by addition and deletion as follows:

4
5 H-250.988 – ~~AID LOW-COST DRUGS TO POOR LOW- AND MIDDLE-INCOME~~
6 ~~COUNTRIES DURING EPIDEMICS AND PANDEMICS TIMES OF PANDEMIC~~
7 ~~HEALTH-CRISES~~

8
9 Our AMA will: (1) ~~encourages pharmaceutical companies to provide to work with~~
10 ~~governmental and appropriate regulatory authorities to encourage (a) the~~
11 ~~prioritization of equity when providing low cost or free medications, including~~
12 ~~therapeutics and vaccines, to countries; (b) the temporary waiver of intellectual~~
13 ~~property protections for necessary medications and other countermeasures; and~~
14 ~~(c) sharing of equipment, materials, scientific methods, and technological~~
15 ~~information, to facilitate production and distribution of necessary medications~~
16 ~~during epidemics and pandemics during times of pandemic health crises; and (2)~~
17 shall work with the World Health Organization (WHO), UNAIDS, and similar
18 organizations that provide comprehensive assistance, including health care, to
19 ~~peer~~ low- and middle-income countries in an effort to improve public health and
20 national stability. (Modify Current HOD Policy)

21
22
23 Resolution 611

24 RESOLVED, That our American Medical Association urge the U.S. government to provide
25 all possible assistance including surplus vaccines and vaccines that have not had
26 emergency use authorization to the citizens of India and other countries in a similar
27 situation in this humanitarian crisis (New HOD Policy); and be it further

28
29 RESOLVED, That our AMA advocate for all possible assistance through WMA and WHO
30 for government and the citizens of India and other countries in a similar situation (Directive
31 to Take Action); and be it further

32
33 RESOLVED, That our AMA recognize the extraordinary efforts of many dedicated
34 physicians and ethnic organizations assisting in this humanitarian crisis. (New HOD
35 Policy)

36
37 Resolutions 608, 609, 610 and 611 call upon the AMA to assist with the humanitarian
38 crisis resulting from the COVID-19 pandemic through sharing supplies with countries that
39 have limited resources. Testimony highlighted the importance of international cooperation
40 to mitigate the spread of COVID-19 and COVID-19 variants as well as to promote herd
41 immunity globally. Speakers offered multiple approaches (e.g., vaccine donations,
42 working with key stakeholders, etc.) to support the production and distribution of vaccines
43 in other counties.

44
45 Testimony was heard on other barriers to vaccine production and distribution such as
46 intellectual property rights and emergency use authorization. Due to the complex nature
47 of these issues, your Reference Committee believes that further exploration would be
48 required and could slow the urgent response needed to address the COVID-19 pandemic.

Amendments

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RECOMMENDED FOR NOT ADOPTION

(6) RESOLUTION 601 – \$100 MEMBER ANNUAL DUES
PAYMENT THROUGH 2023

RECOMMENDATION:

Resolution 601 not be adopted.

HOD ACTION: Resolution 601 not be adopted.

RESOLVED, That our American Medical Association adjust dues to \$100 per year for a trial period of two years for actively practicing physicians and senior physicians. (Directive to Take Action)

Your Reference Committee received robust and mixed testimony in response to Resolution 601.

Your Reference Committee gleans from the Whereas clauses contained in the resolution, and from the testimony presented, that the primary intent of the authors is to seek financial relief for physicians who have encountered financial hardships because of COVID-19. Our AMA currently provides a clear path to financial relief with a “financial hardship exemption” for which no financial details are required.

Some testimony suggested the proposed dues adjustment as a method to attract additional members, but your Reference Committee recognizes that membership growth is not the objective of Resolution 601 and, in any event, is not assured as a result of a reduction in dues. Further, your Reference Committee notes that our AMA’s membership efforts throughout the pandemic have produced positive results and it is reported that our AMA is on track to continue the current 10-year growth trend.

Our AMA Board of Trustees testified that a reduction of AMA dues to \$100 would equate to a revenue loss of \$41.8 million over a two-year period. A loss of this magnitude, coupled with the continued economic uncertainty that might cause possible downturns in other funding sources, could move our AMA from maintaining programs and activities to cutting back substantially.

During testimony, our AMA Board of Trustees provided the following perspective. A \$21.9 million reduction in annual dues revenue equates to, at a minimum, over 20% of the funding for strategic focus areas and core activities, including Advocacy, Health & Science, Ethics, Health Equity, Improving Health Outcomes, Accelerating Change in Medical Education and Practice Sustainability and Professional Satisfaction, as well as AMA’s communication and marketing efforts. This is at a time when our AMA is expanding its Center for Health Equity and increasing its focus on public health, all of which require additional funding.

Additional testimony reflected that there could be a negative ripple effect among our Federation members who might be faced with having to justify why similar action is not being implemented at the local or specialty levels. Still further, some projected that it is

Amendments

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1 more likely our AMA would begin losing current membership gains after two years when
2 the normal dues rates are re-introduced; thus, making a temporary loss in revenue
3 permanent. Lastly, a question was posed with regard to group memberships, which your
4 Reference Committee feels is beyond the scope of this resolution and should be
5 addressed directly by our AMA leadership upon receipt of a formal inquiry.
6

7 In closing, your Reference Committee wishes to highlight that our [AMA's membership](#)
8 [site](#), as well as a Google search for "AMA financial hardship," will lead members to a
9 financial hardship application. Our AMA Board of Trustees reports that members will be
10 granted a financial hardship exemption if they are a prior year member and submit a
11 financial hardship application. Neither proof nor other supporting documents are
12 required. A request for financial hardship consideration can be renewed annually and is
13 not limited to hardships associated with COVID-19.

Amendments

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RECOMMENDED FOR FILING

(7) BOARD OF TRUSTEES REPORT 1 - ANNUAL REPORT

RECOMMENDATION:

That Board of Trustees Report 1 be filed.

HOD ACTION: Board of Trustees Report 1 filed.

The Consolidated Financial Statements for the years ended December 31, 2020 and 2019 and the Independent Auditor's report have been included in a separate booklet titled, "2020 Annual Report."

Your Reference Committee received no testimony in direct response to Board of Trustees Report 1. On behalf of our AMA membership, your Reference Committee extends appreciation to the Board of Trustees for executing sound fiscal responsibility despite the unprecedented challenges of this past year due to the pandemic. Additionally, AMA membership increased in 2020 by 6%, marking 10 consecutive years of growth in membership. Emerging from 2020, our AMA continues its ongoing trend of positive operating results and membership engagement.

Amendments

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- 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 (Ronnie) K.
- 3 Dowling, MD, Cheryl Gibson Fountain, MD, Stuart J. Glassman, MD, MBA,
- 4 Lynda G. Kabbash, MD, and all those who testified before the Committee.

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California

Cheryl Gibson Fountain, MD
American College of Obstetricians and
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David J. Bensema, MD
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Michael D. Chafty, MD, JD
Michigan
Chair

Amendments

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