

DISCLAIMER

The following is a preliminary report of actions taken by the House of Delegates at its 2022 Interim 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 (I-22)

Report of Reference Committee F

Cheryl Gibson Fountain, MD, Chair

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

2 **RECOMMENDED FOR ADOPTION**

3

4 1. Board of Trustees Report 7 - Transparency of Resolution Fiscal Notes

5

6 2. Speakers' Report 1 - Election Committee-Interim Report

7

8 3. Report of the House of Delegates Committee on the Compensation of the

9 Officers

10

11 4. Council on Long Range Planning and Development Report 1 - Senior Physicians

12 Section Five-Year Review

13

14 **RECOMMENDED FOR ADOPTION AS AMENDED**

15

16 5. Board of Trustees Report 2 - Further Action to Respond to the Gun Violence

17 Public Health Crisis

18

19 **RECOMMENDED FOR REFERRAL**

20

21 6. Board of Trustees Report 9 - Employed Physicians

22

23 7. Resolution 602 - Finding Cities for Future AMA Conventions/Meetings

24

25 8. Resolution 607 - Accountability for Election Rules Violations

26

27 **RECOMMENDED FOR REFERRAL FOR DECISION**

28

29 9. Resolution 609 - AMA Declares its Support for Turkish Physicians Imprisoned in

30 Turkey in Violation of their Human and Professional Rights

31

32 **RECOMMENDED FOR NOT ADOPTION**

33

34 10. Board of Trustees Report 8 - The Resolution Committee as a Standing

35 Committee of the House

36

37 11. Resolution 601 - AMA Withdraw its Organizational Strategic Plan to Embed

38 Racial Justice and Advance Health Equity

39

1 12. Resolution 606 - Patient-Centered Health Equity Strategic Plan and Sustainable 2 Funding

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 7 - TRANSPARENCY
OF RESOLUTION FISCAL NOTES

RECOMMENDATION:

Recommendation in Board of Trustees Report 7 be adopted, and the remainder of the Report be filed.

HOD ACTION: Recommendation in Board of Trustees Report 7 adopted and the remainder of the Report filed

Your Board of Trustees recommends that Resolution 608 not be adopted, and the remainder of the report be filed.

One individual commented on the online forum in opposition to the Board report and proposed that AMA policy G-600.061 be amended to exclude from fiscal notes resolutions that contain only advocacy statements, albeit advocacy has fiscal implications.

Your Reference Committee extends its appreciation to the Board of Trustees for providing comprehensive details regarding the development of fiscal notes and recommends that Board of Trustees Report 7 be adopted.

(2) SPEAKERS' REPORT 1 - ELECTION COMMITTEE –
INTERIM REPORT

RECOMMENDATION:

Recommendations in Speakers' Report 1 be adopted and the remainder of the Report be filed.

HOD ACTION: Recommendations in Speakers' Report 1 adopted and the remainder of the Report filed

It is recommended that the following recommendations be adopted, and the remainder of the report filed.

1. That Policy D-610.998, Paragraph 5, be amended by addition and deletion to read as follows:

In accordance with Bylaw 2.13.7, the Speaker shall appoint an Election Committee of 7-9 individuals for 1-year terms (maximum tenure of 4 consecutive terms and a lifetime maximum tenure of 8 terms) to report to the Speaker. These individuals would agree not to be directly involved in a campaign during their tenure and would be appointed from various regions, specialties, sections, and interest groups. The primary role of the committee would be to work with the Speakers to adjudicate any election complaint. Additional roles to be determined by the Speaker and could include

1 monitoring election reforms, considering future campaign modifications and
2 responding to requests from the Speaker for input on election issues that arise. The
3 Speaker and Vice Speaker shall be full members of the Election Committee. (Modify
4 Current HOD Policy)

5
6 2. That Policy D-610.998, Paragraph 7, be amended by addition to read as follows:
7

8 Campaign violation complaints will be investigated by the Election Committee or a
9 subcommittee thereof with the option of including the Office of General Counsel or the
10 Director of the House of Delegates. (Modify Current HOD Policy)

11
12 3. That Policy D-610.998, Paragraph 7(a), be amended by addition to read as follows:
13

14 7(a). The Committee will collectively determine whether a campaign violation has
15 occurred. As part of the investigation process the Election Committee or its
16 subcommittee shall inform the candidate of the complaint filed and give the
17 candidate the opportunity to respond to the allegation. (Modify Current HOD
18 Policy)

19
20 4. That Paragraph 7 be amended by addition of a new sub point "b" to read as follows:
21

22 7(b) If the complaint implicates a delegation or caucus, the Election Committee or its
23 subcommittee shall inform the chair of the implicated delegation or caucus of the
24 complaint filed and give the implicated delegation or caucus chair(s) the
25 opportunity to answer to the allegation as a part of the investigative process.
26 (Modify Current HOD Policy)

27
28 5. That amended Policy D-610.998 be widely communicated, including being published
29 in the Election Manual. (Directive to Take Action)

30
31 Testimony was supportive of the report recommendations, which offered language to
32 further clarify and codify the processes followed by the Election Committee. Testimony
33 noted the importance of ensuring due process and minimizing conflicts.

34
35 One amendment called for individuals appointed to the election committee to agree to not
36 run for an AMA elected position for at least one year after completing their service on the
37 committee. Your Reference Committee was concerned that this amendment may pose
38 unintended consequences related to the role of the Speaker and Vice Speaker, and
39 believes this will be addressed in the planned report from the Election Task Force which
40 is anticipated next year.

41
42 42 Your Reference Committee recommends that Speakers' Report 1 be adopted.

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

3
4 RECOMMENDATION:

5
6 Recommendations in Report of the House of Delegates
7 Committee on the Compensation of the Officers be
8 adopted and the remainder of the Report be filed.

9
10 HOD ACTION: Recommendations in Report of the House of
11 Delegates Committee on the Compensation of the Officers
12 adopted and the remainder of the Report filed

13
14 1. That there be no changes to the Officers' compensation for the period beginning
15 July 1, 2022 through June 30, 2023. (Directive to Take Action.)
16
17 2. That the remainder of the report be filed.

18
19 One individual commented that it has been at least 25 years since the \$750 per year that
20 is allocated for secretarial support was adjusted. No other comments were received.

21
22 Your Reference Committee noted the report reflects the annual limit for secretarial support
23 during the Presidential year is \$15,000, and \$5,000 each for the President-Elect, Chair,
24 Chair-Elect, and Immediate Past President. Secretarial expenses incurred by other
25 Officers is \$750 annually and is in addition to administrative support provided by the AMA's
26 Board office.

27
28
29 (4) COUNCIL ON LONG RANGE PLANNING AND
30 DEVELOPMENT REPORT 1 - SENIOR PHYSICIANS
31 SECTION FIVE-YEAR REVIEW

32
33 RECOMMENDATION:

34
35 Recommendation in Council on Long Range Planning
36 and Development Report 1 be adopted and the
37 remainder of the Report be filed.

38
39 HOD ACTION: Recommendation in Council on Long Range
40 Planning and Development Report 1 adopted and the
41 remainder of the Report filed

42
43 The Council on Long Range Planning and Development recommends that our American
44 Medical Association renew delineated section status for the Senior Physicians Section
45 through 2027 with the next review no later than the 2027 Interim Meeting and that the
46 remainder of this report be filed. (Directive to Take Action)

47
48 In addition to the author's introduction of the report, your Reference Committee received
49 testimony from the Senior Physicians Section emphasizing the importance of

1 incorporating demographic changes into the representation of the House of Delegates,
2 and thanked the Council for their thoughtful work.

3

4 Your Reference Committee recommends that the recommendations in the Council on
5 Long Range Planning and Development Report be adopted, and the remainder be filed.

RECOMMENDED FOR ADOPTION AS AMENDED

1
2 (5) BOARD OF TRUSTEES REPORT 2 - FURTHER ACTION
3 TO RESPOND TO THE GUN VIOLENCE PUBLIC
4 HEALTH CRISIS

5
6 RECOMMENDATION A:

7
8 **Recommendation in Board of Trustees Report 2 be**
amended by addition and deletion to read as follows:

9
10 The Board of Trustees recommends that the following be
11 adopted in lieu of Resolution 246-A-22 and that the
12 remainder of the report be filed:

13
14 1. Our AMA will make readily accessible on the AMA
15 website the comprehensive summary of AMA policies,
16 plans, current activities, and progress regarding the public
17 health crisis of firearm violence. (New HOD Policy)

18
19 2. Our AMA will establish a task force to focus on gun
20 violence prevention including gun-involved suicide.
21 (Directive to Take Action)

22
23 3. Our AMA will support and consider providing grants to
24 evidence-based firearm violence interruption programs in
25 communities, schools, hospitals, and clinics. (Directive to
26 Take Action)

27
28 4. Our AMA will collaborate with interested state and
29 specialty societies to increase engagement in litigation
30 related to firearm safety. (Directive to Take Action)

31
32 5. Our AMA will report annually to the House of Delegates
33 on our AMA's efforts relating to legislation, regulation, and
34 litigation at the federal, state, and local levels to prevent gun
35 violence. (Directive to Take Action)

36
37 RECOMMENDATION B:

38
39 **Recommendation in Board of Trustees Report 2 be**
adopted as amended and the remainder of the Report
be filed.

40
41
42
43 HOD ACTION: Recommendation in Board of Trustees
44 Report 2 adopted as amended and the remainder of the
45 Report filed

1 The Board of Trustees recommends that the following be adopted in lieu of Resolution
2 246 and that the remainder of the report be filed:

3
4 Our AMA will make readily accessible on the AMA website the comprehensive summary
5 of AMA policies, plans, current activities, and progress regarding the public health crisis
6 of firearm violence. (New HOD Policy)

7
8 Despite testimony from the Board of Trustees emphasizing the current work of the Board
9 towards mitigating gun violence and explaining potential unintended consequences of
10 forming an official task force, there was overwhelming testimony in support of the creation
11 and implementation of a task force on the topic of gun violence. Testimony posits that a
12 task force will demonstrate a commitment to the public in addition to putting the AMA in a
13 position to be a leader among other organizations. Testimony indicated that while current
14 AMA efforts reflect a good start, it is simply not enough to mitigate gun violence. Testimony
15 stressed that not only does gun violence impact patients' lives, health, and mental well-
16 being, but also, it impacts physician safety through mass shooting events at healthcare
17 facilities. Moreover, a task force could enhance the Board of Trustees current efforts to
18 put an end to gun violence in this country.

19
20 Your Reference Committee recommends that the report be adopted as amended.

RECOMMENDED FOR REFERRAL

1
2 (6) BOARD OF TRUSTEES REPORT 9 - EMPLOYED
3 PHYSICIANS

4
5 **RECOMMENDATION:**

6
7 **Board of Trustees Report 9 be referred.**

8
9 **HOD ACTION: Board of Trustees Report 9 referred**

10
11 Your Board of Trustees recommends that the following recommendations be adopted in
12 lieu of Resolution 615-N-21, and that the remainder of this report be filed:

13
14 1. That our AMA adopt the following definition of "employed physician":

15
16 An employed physician is any non-resident, non-fellow physician who maintains a
17 contractual relationship to provide medical services with an entity from which the
18 physician receives a W-2 to report their income, and in which the physician does not
19 have a controlling interest, either individually or as part of a collective. (New HOD
20 Policy)

21
22 2. That our AMA re-examine the representation of employed physicians within the
23 organization and report back at the 2024 Annual Meeting. (Directive to Take Action)

24
25 Testimony described the definition of employed physician in the report as being
26 inadequate to properly encompass its complexity. Some testimony expressed concerns
27 about the timeline presented in the report. It was suggested to move up the time for a
28 report back sooner than the 2024 Annual Meeting. Your reference committee
29 recommends that the report back be moved up to the Interim 2023 meeting.

30
31 Due to differing ideas for amendments, and the complexity in defining "employed
32 physician," your Reference Committee recommends that the Board of Trustees Report be
33 referred to gain a better understanding and thus propose more impactful solutions.

34
35
36 (7) RESOLUTION 602 - FINDING CITIES FOR FUTURE AMA
37 CONVENTIONS/MEETINGS

38
39 **RECOMMENDATION:**

40
41 **Resolution 602 be referred.**

42
43 **HOD ACTION: Resolution 602 referred**

44
45 RESOLVED, That our American Medical Association amend Policy G-630.140, "Lodging,
46 Meeting Venues, and Social Functions," by addition and deletion to read as follows:

47
48 AMA policy on lodging and accommodations includes the following:

- 1 1. Our AMA supports choosing hotels for its meetings, conferences, and conventions
2 based on size, service, location, cost, and similar factors.
- 3 2. Our AMA shall attempt, when allocating meeting space, to locate the Section
4 Assembly Meetings in the House of Delegates Meeting hotel or in a hotel in close
5 proximity.
- 6 3. All meetings and conferences organized and/or primarily sponsored by our AMA
7 will be held in a town, city, county, or state that has regulation or enacted
8 comprehensive legislation requiring smoke-free worksites and public places
9 (including restaurants and bars), unless intended or existing contracts or special
10 circumstances justify an exception to this policy, and our AMA encourages state
11 and local medical societies, national medical specialty societies, and other health
12 organizations to adopt a similar policy.
- 13 4. It is the policy of our AMA not to ~~hold meetings organized and/or primarily~~
14 ~~sponsored by our AMA, in cities, counties, or states, or~~ pay member, officer or
15 employee dues in any club, restaurant, or other institution, that has exclusionary
16 policies, including, but not limited to, policies based on, race, color, religion,
17 national origin, ethnic origin, language, creed, sex, sexual orientation, gender,
18 gender identity and gender expression, disability, or age unless intended or
19 existing contracts or special circumstances justify an exception to this policy.
- 20 5. Our AMA staff will work with facilities where AMA meetings are held to designate
21 an area for breastfeeding and breast pumping.
- 22 6. All future AMA meetings will be structured to provide accommodations for
23 members and invited attendees who are able to physically attend, but who need
24 assistance in order to meaningfully participate.
- 25 7. Our AMA will revisit our criteria for selection of hotels and other venues in order to
26 facilitate maximum participation by members and invited attendees with
27 disabilities.
- 28 8. Our AMA will report back to the HOD by no later than the 2023 Annual Meeting
29 with a plan on how to maximize meeting participation for members and invited
30 attendees with disabilities. (Modify Current HOD Policy)

31 38 Your Reference Committee, as well as those who testified, acknowledge that the selection
32 39 of future AMA meeting venues is a complex matter due to several AMA policies that restrict
33 40 venue selection. Additionally, there are a limited number of venues that can accommodate
34 41 the increasing size of our AMA House of Delegates and its sections without requiring
35 42 multiple hotels and/or a convention center.

36 43 Your Reference Committee believes, and testimony supports, referral of this resolution to
37 44 allow our AMA Board of Trustees and its management team the opportunity to address
38 45 any immediate decisions and to provide our House of Delegates with a report back at the
39 46 2023 Interim Meeting that outlines options for the future, including but not limited to options
40 47 for expanding potential venue choices, recommendations for possible policy changes, and
41 48 the political ramifications of boycotting specific states.

1 (8) RESOLUTION 607 - ACCOUNTABILITY FOR ELECTION
2 RULES VIOLATIONS

3
4 **RECOMMENDATION:**

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6 **Resolution 607 be referred.**

7
8 **HOD ACTION: Resolution 607 referred**

9
10 RESOLVED, That our American Medical Association empower the Election Committee to
11 develop a list of appropriate penalties for candidates and caucus/delegation/section
12 leadership who violate election rules (Directive to Take Action); and be it further

13
14 RESOLVED, That the Election Committee define potential election rule violations as minor
15 (oversight or misinterpretation of rules), moderate (more serious and more likely to affect
16 the outcome of an election), and severe (intentional violation with high likelihood of
17 affecting the outcome of an election) and assign appropriate penalties or actions to
18 remedy the situation and/or report the violation to the House of Delegates (Directive to
19 Take Action); and be it further

20
21 RESOLVED, That any candidate who is deemed to have violated the vote trading election
22 rule be disqualified from the current race as well as any future races at the AMA for a
23 period not less than 2 years, upon the recommendation of the Election Committee and
24 approval of the full House of Delegates (Directive to Take Action); and be it further

25
26 RESOLVED, That any caucus/delegation/section leadership that is found to have
27 engaged in vote trading shall not be allowed to sponsor any candidates for a period not
28 less than 2 years (Directive to Take Action); and be it further

29
30 RESOLVED, That anyone who is deemed by the Election Committee to have knowingly
31 and egregiously violated the vote trading rule be referred to the Council on Ethical and
32 Judicial Affairs for potential ethics violations. (Directive to Take Action)

33
34 Testimony was generally supportive of identifying penalties for campaign violations.
35 Although testimony emphasized the importance of a fair, transparent process, and the
36 need for due process, there was dissonance on the best approach for codifying penalties.

37
38 Testimony noted concerns over the feasibility of developing all necessary disciplinary
39 actions in advance. Further, the testimony was split over the appropriate body to finalize
40 these disciplinary actions.

41
42 Your Reference Committee believes that referring Resolution 607 would allow an
43 opportunity to study this issue in an effort to develop the best approach.

RECOMMENDED FOR REFERRAL FOR DECISION

1
2 (9) RESOLUTION 609 - AMA DECLARES ITS SUPPORT
3 FOR TURKISH PHYSICIANS IMPRISONED IN TURKEY
4 IN VIOLATION OF THEIR HUMAN AND PROFESSIONAL
5 RIGHTS

6
7 **RECOMMENDATION:**
8

9 **Resolution 609 be referred for decision.**
10

11 **HOD ACTION: Resolution 609 referred for decision**
12

13 RESOLVED, That our American Medical Association reaffirms Resolution H-65.991,
14 "Persecution of Physicians for Political Reasons and Participation by Doctors in
15 Violations of Human Rights", and H-65.994, "Medical Care in Countries in Turmoil"
16 (Reaffirm HOD Policy); and be it further

17 RESOLVED, That our AMA recommends to its Delegation to the World Medical
18 Association (WMA) to offer AMA's assistance to the WMA with efforts to free unjustly
19 imprisoned health professionals and to preserve the independence of the Turkish
20 Medical Association (Directive to Take Action); and be it further

21 RESOLVED, That the President of the AMA will write to the U.S. Secretary of State to
22 express AMA's concerns and to ask the Secretary to intervene in support of these
23 Turkish health professionals and the independence of the Turkish Medical Association.
24 (Directive to Take Action)

25 Your Reference Committee received testimony highlighting the urgency of acting swiftly
26 in support of our Turkish colleagues and the Turkish Medical Association. Additional
27 testimony from our Board of Trustees indicated that referral for decision of this item would
28 allow for amplification of our AMA voice through our AMA delegation to the World Medical
29 Association. For these reasons, your Reference Committee recommends support for the
30 requested referral for decision.

RECOMMENDED FOR NOT ADOPTION

1
2 (10) BOARD OF TRUSTEES REPORT 8 - THE RESOLUTION
3 COMMITTEE AS A STANDING COMMITTEE OF THE
4 HOUSE

5
6 **RECOMMENDATION:**

7
8 **Recommendation in Board of Trustees Report 8 not be**
9 **adopted and the remainder of the Report be filed.**

10
11 **HOD ACTION: Recommendation in Board of Trustees**
12 **Report 8 not adopted and the remainder of the Report filed**

13
14 Your Board of Trustees offers the following recommendation to be adopted in lieu of
15 Resolutions 605-N-21 and 619-A-22 and the remainder of the report filed.

16
17 That the Board of Trustees prepare a report for consideration at the 2023 Annual Meeting
18 recommending a trial of a resolution committee, including the make-up and operation of
19 the committee and create measures of fairness and effectiveness of the trial. (Directive to
20 Take Action)

21
22 Testimony overwhelmingly opposed the recommendation to conduct a trial of a Resolution
23 Committee. Several concerns associated with a resolution committee were cited,
24 including: diminished ability for minority perspectives to be heard; potential for creating
25 another backlog of resolutions after trial completion; limited debate on topics that could
26 signal emerging problems or issues of concern; compromised adherence to the
27 democratic process; and reduced member engagement in the policy process.

28
29 In addition, testimony indicated that many time-sensitive resolutions may not have been
30 considered due to dependence on a scoring system in lieu of the Resolution Committee
31 convening to discuss their recommendations. Further, it was noted that when the HOD
32 voted on the recommendations of the Resolution Committee, none of the committee
33 decisions were overturned.

34
35 Opposing testimony noted that, in principle, a trial of a Resolution Committee occurred
36 during three of the special meetings of the House of Delegates. Further, testimony
37 supported using lessons learned from the special meetings to adopt efficient practices for
38 future meetings. It was noted, however, that the experience of the special meetings was
39 due to extenuating circumstances associated with the COVID-19 pandemic.

40
41 Testimony in support of the trial of a resolution committee noted that this could be a
42 catalyst toward making policy discussions more focused and efficient given the costs
43 associated with sending delegates to AMA meetings.

44
45 Your Reference Committee wishes to note that amendments were offered in support of
46 forming a committee to evaluate possible next steps based on lessons learned from the
47 special meetings, as well as additional aspects about the resolution process that would be
48 beneficial.

1 Although your Reference Committee acknowledges that promoting focus and efficiency
2 for policy deliberations was favored by many individuals providing testimony, there were
3 disparate opinions for the best mechanism to accomplish this goal. Given the
4 overwhelming testimony in opposition to the formation of a resolution committee, your
5 Reference Committee recommends that Board of Trustees Report 8 not be adopted.

6
7
8 (11) RESOLUTION 601 - AMA WITHDRAW ITS
9 ORGANIZATIONAL STRATEGIC PLAN TO EMBED
10 RACIAL JUSTICE AND ADVANCE HEALTH EQUITY

11
12 **RECOMMENDATION:**

13
14 **Resolution 601 not be adopted.**

15
16 **HOD ACTION: Resolution 601 not adopted**

17
18 RESOLVED, That our American Medical Association withdraw its Organizational Strategic
19 Plan to Embed Racial Justice and Advance Health Equity (Equity Strategic Plan) and
20 rewrite the recommendations for correcting its past support for racially discriminating
21 behavior with removal of the inflammatory rhetoric. (Directive to Take Action)

22
23 There was a plethora of testimony in strong opposition of this resolution. This is the third
24 time the sentiment of this resolution has been brought before the House, and it has been
25 defeated two times prior. Testimony posits that while it is challenging to change the culture
26 of medicine and face individual contributions toward perpetuating systems of oppression,
27 it is necessary to move forward and advance health equity. Testimony was
28 overwhelmingly supportive of the Center for Health Equity and the strategic plan to embed
29 racial justice and health equity. According to testimony, this amendment would take the
30 AMA backwards, instead of propelling it forward.

31
32 Based on abundant testimony in strong opposition, your Reference Committee
33 recommends that resolution 601 not be adopted.

34
35
36 (12) RESOLUTION 606 - PATIENT-CENTERED HEALTH
37 EQUITY STRATEGIC PLAN AND SUSTAINABLE
38 FUNDING

39
40 **RECOMMENDATION:**

41
42 **Resolution 606 not be adopted.**

43
44 **HOD ACTION: Resolution 606 not adopted**

45
46 RESOLVED, Our American Medical Association HOD reaffirm policy H-180.944, "Plan for
47 Continued Progress Toward Health Equity," and aggressively advocate for Health Equity
48 as defined as optimal health for all which should be the goal toward which our AMA will
49 work by advocating for health care access, promoting equity in care, increasing health

1 workforce diversity, influencing determinants of health, and voicing and modeling
2 commitment to health equity (Reaffirm HOD Policy); and be it further
3

4 RESOLVED, That our AMA Center for Health Equity's future strategic plan should include
5 advocacy planning and be presented to the AMA HOD for consideration with the
6 opportunity for it to be more widely understood, strengthened, and supported by the HOD
7 (Directive to Take Action); and be it further
8

9 RESOLVED, As the AMA Center for Health Equity develops its next strategic plan, it shall
10 actively engage our AMA Board of Trustees in the strategic planning process, and ensure
11 a more patient-centered strategic plan for health equity advocacy that is consistent with
12 the intent of AMA policies, including H-180.944, "Plan for Continued Progress Toward
13 Health Equity," and D-180.981, "Plan for Continued Progress Toward Health Equity," and
14 report the strategic plan to the HOD at the 2024 Annual Meeting prior to publicly releasing
15 the plan to the press (Directive to Take Action); and be it further
16

17 RESOLVED, That our AMA, in a collaboration with interested stakeholders, actively
18 advocate for sustainable funding from Congress to increase health equity efforts of
19 identifying and reducing health disparities including but not limited to funding of the Health
20 Resources and Services Administration through U.S. Department of Health and Human
21 Services and our AMA Health Equity Center. (Directive to Take Action)
22

23 Your Reference committee heard testimony in strong opposition to this resolution.
24 Testimony noted that no other department of the AMA is subjected to presenting and
25 obtaining approval of their strategic plan by the House of Delegates. Moreover, this
26 resolution would add another layer of obstacles and impede the important work of the
27 Center for Health Equity.
28

29 While there was no testimony in opposition to the first and fourth clauses, the sentiments
30 of these clauses are already present in existing policy. Therefore, your Reference
31 Committee recommends that resolution 606 be not adopted.

This concludes the report of Reference Committee F. I would like to thank Brooks F. Bock, MD, Robyn F. Chatman, MD, MPH, Rebecca L. Johnson, MD, Shilpen A. Patel, MD, William C. Reha, MD, MBA, Michael B. Simon, MD, MBA, and all those who testified before the Committee.

Brooks F. Bock, MD
American College of Emergency
Physicians

Shilpen A. Patel, MD
American Society for Radiation
Oncology

Robyn F. Chatman, MD, MPH
Ohio

William C. Reha, MD, MBA
American Association of Clinical
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Michael B. Simon, MD, MBA
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