

DISCLAIMER

The following is a preliminary report of actions taken by the House of Delegates at its 2023 Annual 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 (A-23)

Report of Reference Committee F

Cheryl Gibson Fountain, MD, Chair

Your Reference Committee recommends the following consent calendar for acceptance:

RECOMMENDED FOR ADOPTION

1. Board of Trustees Report 4 – AMA 2024 Dues
2. Board of Trustees Report 13 – Delegate Apportionment and Pending Members
3. Board of Trustees Report 18 – Making AMA Meetings Accessible
4. Board of Trustees Report 20 – Surveillance Management Systems for Organized Medicine Policies and Reports
5. Report of the House of Delegates Committee on the Compensation of the Officers
6. Council on Constitution and Bylaws/Council on Long Range Planning and Development Report 1 – Joint Council Sunset Review of 2013 House Policies
7. Resolution 604 – Speakers Task Force to Review and Modernize the Resolution Process
8. Resolution 610 – NIH Public Access Plan

RECOMMENDED FOR ADOPTION AS AMENDED OR SUBSTITUTED

9. Resolution 602 – Supporting the Use of Gender-Neutral Language
10. Resolution 607 – Enabling Sections of the American Medical Association

RECOMMENDED FOR REFERRAL

11. Resolution 603 – Environmental Sustainability of AMA National Meetings
Resolution 608 – Supporting Carbon Offset Programs for Travel for AMA Conferences

- 1 12. Resolution 605 – Equity and Justice Initiatives for International Medical
- 2 Graduates
- 3
- 4 13. Resolution 606 – AMA Reimbursement of Necessary HOD Business Meeting
- 5 Expenses for Delegates and Alternate Delegates
- 6
- 7 14. Resolution 609 – Encouraging Collaboration Between Physicians and Industry in
- 8 AI (Augmented Intelligence) Development
- 9

10 **RECOMMENDED FOR NOT ADOPTION**

- 11
- 12 15. Resolution 601 – Solicitation Using the AMA Brand
- 13

14 **RECOMMENDED FOR FILING**

- 15
- 16 16. 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 4 - AMA 2024 DUES

RECOMMENDATION:

Recommendation in Board of Trustees Report 4 be adopted and the remainder of the Report be filed.

HOD ACTION: Recommendation in Board of Trustees Report 4 adopted and the remainder of the Report filed.

The Board of Trustees recommends no change to the dues levels for 2024, 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)

Testimony was limited in response to Board of Trustees Report 4, but included a request that future reports be segmented to reflect the number of dues paid at full and discounted rates.

(2) BOARD OF TRUSTEES REPORT 13 - DELEGATE APPORTIONMENT AND PENDING MEMBERS

RECOMMENDATION:

Recommendation in Board of Trustees Report 13 be adopted and the remainder of the Report be filed.

HOD ACTION: Recommendation in Board of Trustees Report 13 adopted and the remainder of the Report filed.

The Board of Trustees recommends that paragraphs 2-4 of Policy G-600.016 and paragraph 1 of Policy G-600.959 be rescinded and the remainder of the report filed.

Testimony provided by the Board of Trustees reflected that the results from the trial period did not provide evidence that pending members increased membership or

1 benefited constituent societies. The trial also revealed some potential downsides, such
2 as adding additional cost to member tracking and unnecessarily complicating the
3 apportionment process. Thus, the Board of Trustees is recommending that the practice
4 of counting pending members for apportionment purposes not be continued and our
5 AMA return to the practice of counting actual members for apportionment.

6
7 There was confusion in the testimony opposing Board of Trustees Report 13 regarding
8 the definition of pending member, which lead your Reference Committee to believe that
9 the recommendation of the Board of Trustees to end the practice of counting pending
10 members is a sound recommendation.

11
12 Your reference committee recommends Board of Trustees Report 13 be adopted.

13
14
15 (3) BOARD OF TRUSTEES REPORT 18 - MAKING AMA
16 MEETINGS ACCESSIBLE

17
18 **RECOMMENDATION:**

19
20 **Recommendation in Board of Trustees Report 18 be**
21 **adopted and the remainder of the Report be filed.**

22
23 **HOD ACTION: Recommendation in Board of Trustees**
24 **Report 18 adopted and the remainder of the Report filed.**

25
26 The Board of Trustees recommends that Policy G-630.140 [8] be rescinded as being
27 accomplished by this report, and the remainder of the report be filed.

28
29 Board of Trustees Report 18 outlines accommodations to make AMA meetings
30 accessible for members and invited attendees with disabilities. Testimony indicated that
31 the Board report did not provide a plan for members who cannot physically attend AMA
32 meetings, and requested a report back outlining options for those members.

33
34 It was shared that a report addressing Resolution 622-A-22, HOD Modernization, will be
35 presented for consideration during the 2023 Interim Meeting. This report will address
36 concerns associated with members that cannot physically attend in person, regardless of
37 the reason.

38
39 Therefore, your Reference Committee recommends that Board of Trustees Report 18 be
40 adopted.

(4) BOARD OF TRUSTEES REPORT 20 - SURVEILLANCE
MANAGEMENT SYSTEM FOR ORGANIZED MEDICINE
POLICIES AND REPORTS

RECOMMENDATION:

**Recommendations in Board of Trustees Report 20 be
adopted and the remainder of the Report be filed.**

**HOD ACTION: Recommendations in Board of Trustees
Report 20 adopted and the remainder of the Report filed.**

The Board of Trustees recommends that the following recommendations be adopted in lieu of Resolution 609-A-22 and that the remainder of this report be filed:

1. That our American Medical Association (AMA) maintains the existing resolution management structure within the House of Delegates without imposing a potentially confusing or unsustainable prioritization matrix on delegates and reference committees. (New HOD Policy)
2. That our AMA continues to invest in critical information technology and other appropriate infrastructure that allows for the tracking of past resolutions, existing policy, and supporting materials. (New HOD Policy)

Board of Trustees Report 20 outlines efforts to learn more about user experiences with resources such as PolicyFinder, Council Report Finder and AMA Archives. The report noted that these findings will be used to inform opportunities for enhanced tracking.

Limited testimony noted concerns over the scope and process for implementing Recommendation 2, which calls for the AMA to continue investment in critical information technology and other appropriate infrastructure that allows for the tracking of past resolutions, existing policy and supporting materials.

Given the ongoing work of the AMA on this issue, your Reference Committee recommends adoption of Board of Trustees Report 20.

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

RECOMMENDATION:

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

**HOD ACTION: Recommendation in the Report of the House
of Delegates Committee on the Compensation of the
Officers adopted and the remainder of the Report filed.**

1 The House of Delegates Committee on the Compensation of the Officers recommends
2 that the following recommendations be adopted:

- 3
4 1. That there be no changes to the Officers' compensation for the period beginning
5 July 1, 2023, through June 30, 2024. (Directive to Take Action.)
6
7 2. That the remainder of the report be filed.

8
9 The Committee on Compensation testified that there are no changes to the Officers'
10 compensation for July 1, 2023 through June 30, 2024.

11
12 Your Reference Committee recommends that the recommendations in the Report of the
13 House Delegates Committee on Compensation of the Officers be adopted, and the
14 remainder be filed.

15
16
17 (6) COUNCIL ON CONSTITUTION AND BYLAWS/COUNCIL
18 ON LONG RANGE PLANNING AND DEVELOPMENT
19 REPORT 1 - JOINT COUNCIL SUNSET REVIEW OF
20 2013 HOUSE POLICIES

21
22 **RECOMMENDATION:**

23
24 **Recommendation in the Council on Constitution and**
25 **Bylaws/Council on Long Range Planning and**
26 **Development Report 1 be adopted and the remainder**
27 **of the Report be filed.**

28
29 **HOD ACTION: Recommendation in the Council on**
30 **Constitution and Bylaws/Council on Long Range Planning**
31 **and Development Report 1 adopted and the remainder of**
32 **the Report filed.**

33
34 The Councils on Constitution and Bylaws and Long Range Planning and Development
35 recommend that the House of Delegates policies that are listed in the appendix to this
36 report be acted upon in the manner indicated and the remainder of this report be filed.

37
38 Beyond the introduction of the Council on Constitution and Bylaws and the Council on
39 Long Range Planning and Development Report 1, no further testimony was provided.

40
41 Your Reference Committee wishes to extend its appreciation to the councils for their
42 collaborative effort and thorough work product.

(7) RESOLUTION 604 - SPEAKERS TASK FORCE TO
REVIEW AND MODERNIZE THE RESOLUTION
PROCESS

RECOMMENDATION:

Resolution 604 be adopted.

HOD ACTION: Resolution 604 adopted.

RESOLVED, That our American Medical Association form a Speakers Task Force on the Resolution Process to review the entire process of handling resolutions for our AMA House of Delegates, including but not limited to definitions of on time resolutions, emergency resolutions, and late resolutions, deadlines for submission of resolutions by all sections, processing and review of reference committee reports, and use of virtual meetings so that all on time resolutions can be submitted by the same deadline (Directive to Take Action); and be it further

RESOLVED, That our AMA Speakers Task Force on the Resolution Process report back to our AMA House of Delegates by the 2024 Annual Meeting with recommendations regarding the resolution process. (Directive to Take Action)

Testimony was largely supportive of Resolution 604. According to testimony, the AMA should evaluate and identify options to streamline various aspects of the resolution process. Although testimony noted that integrating virtual options could support efficiency, it was shared that the option to hold deliberations in-person should be preserved.

While there were requests for referral to allow exploration of options to enhance resolution processes, your Reference Committee believes this is a House of Delegates issue that should be handled through the Speaker's Taskforce. Therefore, your Reference Committee recommends adoption.

(8) RESOLUTION 610 - NIH PUBLIC ACCESS PLAN

RECOMMENDATION:

Resolution 610 be adopted.

HOD ACTION: Resolution 610 adopted.

RESOLVED, That our American Medical Association work with publishing and professional organizations, and work with Congress, to raise awareness of possible adverse consequences of the proposed National Institutes of Health Public Access Plan and to mitigate such consequences to ensure continued equitable access to quality clinical research. (Directive to Take Action)

1 Your Reference Committee heard an abundance of testimony in support of Resolution
2 610.

3
4 Testimony stressed the potential unintended consequences of the National Institutes of
5 Health Public Access Plan regarding equity, quality, scientific record oversight, and
6 financial sustainability. Supporters of this resolution also explained the importance of
7 working collaboratively with stakeholders to devise solutions that balance equity,
8 accessibility, and sustainability to ensure a thriving and robust scientific community.

9
10 Your Reference Committee recommends Resolution 610 be adopted.

RECOMMENDED FOR ADOPTION AS AMENDED

(9) RESOLUTION 602 - SUPPORTING THE USE OF
GENDER-NEUTRAL LANGUAGE

RECOMMENDATION A:

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

**HOD ACTION: Resolution 602 amended by addition and
deletion to read as follows:**

RESOLVED, That our American Medical Association (1) Recognize the importance of using gender-neutral language such as gender neutral pronouns, terms, imagery, and symbols in respecting the spectrum of gender identity, (2) ~~revise all relevant policies to utilize gender-neutral language in place of gendered language where such text inappropriately appears~~ prospectively amend all current AMA policy, where appropriate, to include gender-neutral language by way of the reaffirmation and sunset processes, (3) utilize gender-neutral language in future policies, internal communications, and external communications where gendered language does not specifically need to be used, (4) encourage the use of gender-neutral language in public health and medical messaging, (5) encourage other professional societies to utilize gender-neutral language in their work, and (6) support the use of gender-neutral language in clinical spaces that may serve both cisgender and gender-diverse individuals. (New HOD Policy)

RECOMMENDATION B:

Resolution 602 be adopted as amended.

HOD ACTION: Resolution 602 adopted as amended.

RESOLVED, That our American Medical Association (1) recognize the importance of using gender-neutral language such as gender neutral pronouns, terms, imagery, and symbols in respecting the spectrum of gender identity, (2) revise all relevant policies to utilize gender-neutral language in place of gendered language where such text inappropriately appears, (3) utilize gender-neutral language in future policies, internal communications, and external communications where gendered language does not specifically need to be used, (4) encourage the use of gender-neutral language in public health and medical messaging, (5) encourage other professional societies to utilize gender-neutral language in their work, and (6) support the use of gender-neutral

1 language in clinical spaces that may serve both cisgender and gender-diverse
2 individuals. (New HOD Policy)

3
4 Your Reference Committee received generally supportive testimony in response to
5 Resolution 602; however, there were concerns expressed about use of AMA resources
6 to retrospectively revise all relevant policies to utilize gender-neutral language in place of
7 gendered language where such text inappropriately appears. Alternatively, it was
8 proffered that current AMA policy be amended gradually by way of the reaffirmation and
9 sunset processes.

10
11
12 (10) RESOLUTION 607 - ENABLING SECTIONS OF THE
13 AMERICAN MEDICAL ASSOCIATION

14
15 **RECOMMENDATION A:**

16
17 **Resolution 607 be amended by addition and deletion**
18 **to read as follows:**

19
20 **HOD ACTION: Resolution 607 amended by addition and**
21 **deletion to read as follows:**

22
23 RESOLVED, That our American Medical Association
24 Sections ~~will be given an option to meet~~ ~~meetings be held~~
25 officially over no less than two calendar days in anticipation
26 of general House of Delegates meetings ~~subject to space~~
27 ~~limitations and budget constraints unless otherwise~~
28 ~~determined by a given individual Section unless otherwise~~
29 ~~determined by a given individual Section.~~ (Directive to
30 Take Action)

31
32 **RECOMMENDATION B:**

33
34 **Resolution 607 be adopted as amended.**

35
36 **HOD ACTION: Resolution 607 adopted as amended.**

37
38 RESOLVED, That our American Medical Association Section meetings be held officially
39 over no less than two calendar days in anticipation of general House of Delegates
40 meetings, unless otherwise determined by a given individual Section. (Directive to Take
41 Action)

42
43 Your Reference Committee heard mixed testimony in response to Resolution 607.
44 Concerns noted that sections that need additional time to meet should be given the
45 option without requiring all sections to move to a two-day meeting. It was further noted
46 that an additional day for sections meeting could present funding and staffing concerns.
47 In addition, space limitations, particularly at already contracted venues, may present
48 challenges.

- 1 During testimony, clarification was offered that neither the Board of Trustees nor the
- 2 House of Delegates has restricted the length of meetings for sections.
- 3
- 4 Your Reference Committee proffered an amendment to address concerns related to
- 5 determining the length of the Section meetings. Therefore, your Reference Committee
- 6 recommends that Resolution 607 be adopted as amended.

RECOMMENDED FOR REFERRAL

- (11) RESOLUTION 603 - ENVIRONMENTAL
SUSTAINABILITY OF AMA NATIONAL MEETINGS
RESOLUTION 608 - SUPPORTING CARBON OFFSET
PROGRAMS FOR TRAVEL FOR AMA CONFERENCES

RECOMMENDATION:

Resolutions 603 and 608 be referred.

HOD ACTION: Resolutions 603 and 608 referred.

Resolution 603:

RESOLVED, That our American Medical Association commit to reaching net zero emissions for its business operations by 2030, and remain net zero or net negative, as defined by a carbon neutral certifying organization, and report annually on the AMA's progress towards implementation (New HOD Policy); and be it further

RESOLVED, That our AMA work with appropriate stakeholders to encourage the United States healthcare system, including but not limited to hospitals, clinics, ambulatory care centers, and healthcare professionals, to decrease emissions to half of 2010 levels by 2030 and become net zero by 2050, and remain net zero or negative, as defined by a carbon neutral certifying organization, including by creating educational materials (Directive to Take Action); and be it further

RESOLVED, That our AMA evaluate the feasibility of purchasing carbon offsets for members traveling to and from Annual and Interim meetings and report back to the House of Delegates (Directive to Take Action); and be it further

RESOLVED, That our AMA evaluate the feasibility of holding future Annual and Interim meetings at Leadership in Energy and Environmental Design-certified or sustainable conference centers and report back to the House of Delegates. (Directive to Take Action)

Resolution 608:

RESOLVED, That our American Medical Association facilitate the mitigation or offset of carbon emissions related to AMA events, including planning and management, travel, and conference operations, by procurement of sustainable or otherwise carbon-neutral energy, travel services, supplies, etc. under the direct control of the AMA and provision for conference attendees and other external stakeholders to access the equivalent mitigation or offsets for their own attendance and related activities. Mitigation and offset measures may include purchase of renewable energy credits, sustainable purchasing requirements integrating emissions criteria, investment in forestry and conservation, energy efficiency projects, or other instruments traded by accredited entities. (Directive to Take Action)

1 Your Reference Committee received overwhelming testimony favoring referral of both
2 Resolutions 603 and 608. Testimony suggested that our AMA needs to lead the
3 profession by example, but it was acknowledged that a fully vetted strategic plan for
4 addressing environmental sustainability needs to be developed with attention to fiscal
5 impact.

6
7
8 (12) RESOLUTION 605 - INTERNATIONAL MEDICAL
9 GRADUATES SECTION

10
11 **RECOMMENDATION:**

12
13 **Resolution 605 be referred.**

14
15 **HOD ACTION: Resolution 605 referred.**

16
17 RESOLVED, That our American Medical Association, via the Center for Health Equity,
18 create a yearly session (during the Interim or Annual Meeting) as a part of the equity
19 forum that will be dedicated to international medical graduates (Directive to Take Action);
20 and be it further

21
22 RESOLVED, That our AMA, via the Center of Health Equity, create an amendment to
23 the health equity plan that will address the issues of equity and justice for international
24 medical graduates. (Directive to Take Action

25
26 Testimony received in response to Resolution 605 was supportive of the intent, noting
27 that International Medical Graduates face considerable discrimination and have specific
28 professional issues of concern. Although an alternative resolution was proffered, there
29 were questions about the best mechanism for collaboration and engagement with the
30 Center for Health Equity.

31
32 Your Reference Committee would like to highlight that the AMA's strategic plan to
33 embed racial justice and advance health equity will be updated later this year. Future
34 updates could potentially incorporate issues affecting International Medical Graduates.
35 Therefore, your Reference Committee recommends that Resolution 605 be referred to
36 achieve this purpose.

37
38
39 (13) RESOLUTION 606 - AMA REIMBURSEMENT OF
40 NECESSARY HOD BUSINESS MEETING EXPENSES
41 FOR DELEGATES AND ALTERNATE DELEGATES

42
43 **RECOMMENDATION:**

44
45 **Resolution 606 be referred.**

46
47 **HOD ACTION: Resolution 606 referred for report back at I-**
48 **23.**

1 RESOLVED, That our American Medical Association develop a reimbursement policy
2 consistent with established AMA travel policies for reasonable travel expenses that any
3 state or national specialty society is eligible to receive reimbursement for its delegate's
4 and alternate delegate's actual expenses directly related to the necessary business
5 functions required of its AMA delegates and alternate delegates in service to the AMA at
6 HOD meetings, including travel, lodging, and meals (Directive to Take Action); and be it
7 further

8
9 RESOLVED, That each state or national specialty society requesting such
10 reimbursement for its delegate's and alternate delegate's reasonable travel expenses
11 will submit its own aggregated documentation to the AMA in whatever form is requested
12 by the AMA. (Directive to Take Action)

13
14 Your Reference Committee heard mixed testimony in response to Resolution 606.
15 Those favoring adoption indicated that a number of state and medical specialty society
16 delegations have difficulty funding representatives due to continued membership
17 declines. Several representatives indicated they incur personal expense to attend our
18 AMA House of Delegates meetings. In addition, medical students and residents
19 expressed issues with obtaining funding and are seeking inclusion in the development of
20 an AMA reimbursement policy. Those opposed testified that there is insufficient
21 information to make an informed decision.

22
23 The Board of Trustees indicated that due to the complexity of the issue, referral of
24 Resolution 606 would be welcomed. Specific issues of concern, included:

- 25
26 • The estimated \$8.1 million dollar fiscal note would be the minimum annual operating
27 expense.
28
29 • Policy does not permit AMA to use reserves for ongoing annual operating expenses,
30 which means our AMA would need to find expense reductions in other parts of the
31 budget.
32
33 • Although our AMA has experienced exceptional fiscal success over the last several
34 years due to a reduction in expenses during the pandemic, once the Association
35 returns to full employment and regular operations, our AMA will be back to the
36 normal budgeted levels.
37
38 • Expanding the individuals whose expenses are paid for involve tax and legal
39 implications that need to be fully vetted.
40
41 • An assessment of the impact on our AMA brand and potential effects on advocacy
42 activity needs to be undertaken.

43
44 Your Reference Committee found the Board of Trustees testimony to be most
45 compelling given their fiduciary responsibility for our AMA. Therefore, your Reference
46 Committee believes referral with report back at the 2024 Annual Meeting will allow
47 sufficient time to identify and fully assess the impact on our AMA.

(14) RESOLUTION 609 - ENCOURAGING COLLABORATION
BETWEEN PHYSICIANS AND INDUSTRY IN AI
(AUGMENTED INTELLIGENCE) DEVELOPMENT

RECOMMENDATION:

Resolution 609 be referred.

HOD ACTION: Resolution 609 referred.

RESOLVED, That our American Medical Association augment the existing Physician Innovation Network (PIN) through the creation of advisors to specifically link physician members of AMA and its associated specialty societies with companies or individuals working on augmented intelligence (AI) research and development, focusing on:

- 1) Expanding recruitment among AMA physician members,
- 2) Advising AMA physician members who are interested in healthcare innovation/AI without knowledge of proper channels to pursue their ideas,
- 3) Increasing outreach from AMA to industry leaders and companies to both further promote the PIN and to understand the needs of specific companies,
- 4) Facilitating communication between companies and physicians with similar interests,
- 5) Matching physicians to projects early in their design and testing stages,
- 6) Decreasing the time and workload spent by individual physicians on finding projects themselves,
- 7) Above all, boosting physician-centered innovation in the field of AI research and development (Directive to Take Action); and be it further

RESOLVED, That our AMA support selection of PIN advisors through an application process where candidates are screened by PIN leadership for interpersonal skills, problem solving, networking abilities, objective decision making, and familiarity with industry. (New HOD Policy)

The majority of testimony in response to Resolution 609 was supportive of referral for study. Testimony stressed the complexity of the issue, and the importance of ensuring physicians have representation in the evolving industry of augmented intelligence. There was support for the intent of the resolution, but some testimony indicated the resolution was too prescriptive as written.

Your Reference Committee recommends that Resolution 609 be referred for report back.

RECOMMENDED FOR NOT ADOPTION
REFERRED FOR DECISION

(15) RESOLUTION 601 - SOLICITATION USING THE AMA BRAND

RECOMMENDATION:

Resolution 601 not be adopted.

HOD ACTION: Resolution 601 referred for decision.

RESOLVED, That our American Medical Association study the use of AMA branded solicitation material mailed to physicians, the impact it has on the perception of our AMA by current and potential physician members, and the merits of continuing to use these materials in future communications (Directive to Take Action); and be it further

RESOLVED, That our American Medical Association survey our membership on the preferred method to receive third-party solicitation material (mail, phone, email, social media) and provide a method to opt-out of certain methods if not desired. (Directive to Take Action)

Your Reference Committee received mixed testimony in response to Resolution 601. Those who testified in support expressed concern about third-party advertisements tarnishing our AMA's reputation, and the inconveniences and frustration of receiving advertisements that are not of interest.

The Board of Trustees testimony spoke in opposition of this resolution and explained that: (a) reducing the frequency of direct mail would reduce customer base and negatively impact revenue; (b) a quantitative study could cost in excess of \$200K and is unlikely to yield definitive actionable results; (c) all physicians and medical students already have the option to opt-out of marketing communications, and that these options are outlined in our AMA's Data Distribution and Privacy Policy; (d) our AMA is in the process of enhancing and streamlining the options offered to control private data usage.

For these reasons, your Reference Committee recommends Resolution 601 not be adopted.

RECOMMENDED FOR FILING

(16) BOARD OF TRUSTEES REPORT 1 - ANNUAL REPORT

RECOMMENDATION:

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, 2022 and 2021 and the Independent Auditor's report have been included in a separate booklet, titled "2022 Annual Report." This booklet is included in the Handbook mailing to members of the House of Delegates and will be discussed at the Reference Committee F hearing.

Beyond the introduction of Board of Trustees Report 1, your reference committee received no further testimony.

Your reference committee recommends that the Board of Trustees Report 1 be filed.

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

Robyn F. Chatman, MD, MPH
Ohio

William C. Reha, MD, MBA
American Association of Clinical
Urologists, Inc.

Rebecca L. Johnson, MD
Florida

Michael B. Simon, MD, MBA
American Society of Anesthesiologists

Shilpen A. Patel, MD
American Society for Radiation
Oncology

Cheryl Gibson Fountain, MD
American College of Obstetricians and
Gynecologists
Chair