DISCLAIMER

The following is a preliminary report of actions taken by the House of Delegates at its 2024 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-24)

Report of Reference Committee F

Rebecca L. Johnson, MD, Chair

Your Reference Committee recommends the following consent calendar for acceptance:

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RECOMMENDED FOR ADOPTION

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- 1. Board of Trustees Report 4 - AMA 2025 Dues
- 2. Board of Trustees Report 21 - American Medical Association Meeting Venues and Accessibility
- 3. Board of Trustees Report 23 - United States Professional Association for 9 Transgender Health Observer Status in the House of Delegates
- 10 Board of Trustees Report 26 - Equity and Justice Initiatives for International 4. 11 Medical Graduates
- 12 5. Board of Trustees Report 28 - Encouraging Collaboration Between Physicians 13 and Industry in AI Development
- 14 Board of Trustees Report 33 - Employed Physicians 6.
- 15 7. Report of the House of Delegates Committee on Compensation of the Officers
- Speakers' Report 1 Report of the Resolution Modernization Task Force Update 16 8.
- 17 9. Council on Constitution and Bylaws/Council on Long Range Planning and Development Report 1 - Joint Council Sunset Review of 2014 House Policies 18
- Council on Long Range Planning and Development Report 1 Establishment of a 19 10. 20 LGBTQ+ Section
- 21 Resolution 602 - Ranked Choice Voting 11.
 - Resolution 609 Standardization of the Endorsement Process 12.

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RECOMMENDED FOR ADOPTION AS AMENDED

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- 13. Board of Trustees Report 25 - Environmental Sustainability of AMA National Meetings. Supporting Carbon Offset Programs for Travel for AMA Conferences Resolution 605 - Walking the Walk of Climate Change
- 29 14. Board of Trustees Report 35 - Mitigating the Cost of Medical Student 30 Participation in AMA Meetings
- 31 15. Resolution 601 - Annual Holocaust Remembrance Event
- 32 Resolution 604 - Confronting Ageism in Medicine 16.
- 33 Resolution 606 - Creation of an AMA Council with a Focus on Digital Health 17. 34 Technologies and Al
- 35 18. Resolution 608 - The American Medical Association Diversity Mentorship 36 Program

1 RECOMMENDED FOR ADOPTION IN LIEU OF 2			
3	19.	Resolution 603 - End Attacks on Health and Human Rights in Israel and Palestine	
5 6		Resolution 610 - Opposition to Collective Punishment	
7 8	REC	OMMENDED FOR NOT ADOPTION	
9 10 11 12	20.	Resolution 607 - Appealing to our AMA to Add Clarity to its Mission Statement to Better Meet the Need of Physicians, the Practice of Medicine and the Public Health	
13 14	REC	OMMENDED FOR FILING	
15 16 17	21. 22.	Board of Trustees Report 1 - Annual Report Board of Trustees Report 27 - AMA Reimbursement of Necessary HOD Business Meeting Expenses for Delegates and Alternates	
	Ame	ndments	

If you wish to propose an amendment to an item of business, click here: <u>Submit New Amendment</u>

RECOMMENDED FOR ADOPTION

(1) BOARD OF TRUSTEES REPORT 4 - AMA 2025 DUES

RECOMMENDATION:

 Madam Speaker, your Reference Committee recommends that the Recommendation in Board of Trustees Report 4 be <u>adopted</u> and the remainder of the Report be filed.

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

The Board of Trustees recommends no change to the dues levels for 2025, that the following be adopted and that the remainder of this report be filed:

Regular Members Physicians in Their Fourth Year of Practice Physicians in Their Third year of Practice Physicians in Their Second Year of Practice Physicians in Their First Year of Practice Physicians in Military Service Semi-Retired Physicians Fully Retired Physicians	. \$315 . \$210 . \$105 \$60 . \$280 . \$210
	\$84 \$45
	···· + 3

(Directive to Take Action)

Dues pricing is routinely evaluated to ensure that the membership value proposition is optimized through enhancing the AMA's membership benefits portfolio.

Online Forum testimony was limited. The following editorial change will be made for a editorial error that appears in the report:

The Board of Trustees recommends no change to the dues levels for 2024-2025, that the following be adopted and that the remainder of this report be filed:

Beyond a statement from the AMA Board of Trustees, no in-person testimony was provided. Your Reference Committee recommends that Board of Trustees Report 4 be adopted.

(2) BOARD OF TRUSTEES REPORT 21 - AMERICAN MEDICAL ASSOCIATION MEETING VENUES AND ACCESSIBILITY

RECOMMENDATION:

Madam Speaker, your Reference Committee recommends that the Recommendation in Board of Trustees Report 21 be <u>adopted</u> and the remainder of the Report be filed.

HOD ACTION: Recommendation in Board of Trustees Report 21 <u>adopted</u> and the remainder of the Report <u>filed</u>.

The Board therefore recommends Policy G-630.140 be reaffirmed and is strictly enforced as a resolute stance against all forms of discrimination, and support of evidenced-based medicine, underscoring our commitment to fostering an inclusive and safe environment for all attendees. This strategic recommendation places a primary emphasis on prioritizing attendee safety, reflecting the values and principles upheld by the AMA.

Testimony in response to Board of Trustees Report 21 was generally supportive. The Medical Student Section (MSS) highlighted that current Policy G-630.140 negatively impacts MSS regional meetings. Prior to the pandemic, some regions were limited in their ability to host in-person meetings due to site limitations in states that were in violation of AMA policy. The MSS supports amendment to the fourth clause of Policy G-630.140 to include adding the term "national"; thereby, allowing MSS regional meetings to occur without compromising the anti-discrimination stance for national events.

Your Reference Committee anticipated recommending that Board of Trustees Report 21 be amended to reflect the requested change to AMA Policy G-630.140; however, our Board of Trustees recommendation to reaffirm policy does not open the current policy for an amendment. To amend AMA Policy G-630.140, a resolution specific to that policy would need to be introduced.

Therefore, your Reference Committee recommends adoption of Board of Trustees Report 21 as written.

(3) BOARD OF TRUSTEES REPORT 23 - UNITED STATES PROFESSIONAL ASSOCIATION FOR TRANSGENDER HEALTH OBSERVER STATUS IN THE HOUSE OF DELEGATES

RECOMMENDATION:

Madam Speaker, your Reference Committee recommends that the Recommendation in Board of Trustees Report 23 be <u>adopted</u> and the remainder of the report be <u>filed</u>.

HOD ACTION: Recommendation in Board of Trustees Report 23 <u>adopted</u> and the remainder of the Report <u>filed</u>.

The Board of Trustees recommends that the United States Professional Association for Transgender Health be admitted as an Official Observer in the House of Delegates, and that the remainder of this report be filed.

Your Reference Committee received limited but supportive testimony in response to this item of business. Your Reference Committee favors adoption of Board of Trustees Report 23 and looks forward to welcoming our colleagues from the United States Professional Association for Transgender Health.

(4) BOARD OF TRUSTEES REPORT 26 - EQUITY AND JUSTICE INITIATIVES FOR INTERNATIONAL MEDICAL GRADUATES

RECOMMENDATION:

Madam Speaker, your Reference Committee recommends that the Recommendation in Board of Trustees Report 26 be <u>adopted</u> and the remainder of the Report be filed.

HOD ACTION: Recommendation in Board of Trustees Report 26 <u>adopted</u> and the remainder of the Report filed.

The Board of Trustees recommends that Resolution 605-A-23 not be adopted and that the remainder of the report be filed.

Testimony provided by the Board of Trustees indicated that this report was written to offer clarity on whether the AMA, through the Center for Health Equity, will incorporate an annual session focused on international medical graduates (IMGS) into the equity forum. Further, this report addresses whether the AMA should, through the Center for Health Equity, amend the health equity plan to address the issues of equity and justice for international medical graduates.

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appreciation for AMA efforts to ensure physician input in various aspects of AI development in health care. 43

Your Reference Committee recommends adoption of Board of Trustees Report 28.

The recommendation in Board of Trustees Report 26 is based on the following: "to permanently designate a particular topic or group over others would be counterproductive to the ideals of fairness and equity and risks the possibility of harm, creating an atmosphere of resentment and discouragement among those who may feel excluded or unfairly treated." As AMA policy requires an equity forum at least once a year, each meeting presents an opportunity to provide education on a variety of topics including, but not limited to, issues impacting IMGs

Testimony indicated that the IMG Section have since engaged in productive conversations with the Board of Trustees and the Center for Health Equity on opportunities to create awareness and provide education on issues of concern.

Your Reference Committee recommends adoption of Board of Trustees Report 26.

BOARD OF TRUSTEES REPORT 28 - ENCOURAGING (5) COLLABORATION BETWEEN PHYSICIANS AND INDUSTRY IN AI DEVELOPMENT

RECOMMENDATION:

Reference Committee Madam Speaker, vour recommends that the Recommendation in Board of Trustees Report 28 be adopted and the remainder of the Report be filed.

HOD ACTION: Recommendation in Board of Trustees Report 28 adopted and the remainder of the Report filed.

The Board of Trustees recommends that Resolution 609-A-23 not be adopted and that this report be filed.

The AMA Board of Trustees provided an overview of the report, noting that the AMA has various existing initiatives, research, policy, advocacy efforts, educational material and other resources that are aligned with the desire to boost physician-centered innovation in the field of AI research and development. As such, much of the work that Resolution 609-A-23 asks the AMA to conduct is already ongoing.

Limited Online Forum testimony was supportive of the Board of Trustees Report and noted

BOARD OF TRUSTEES REPORT 33 - EMPLOYED (6) **PHYSICIANS**

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RECOMMENDATION:

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Madam vour Reference Committee Speaker. recommends that the Recommendation in Board of Trustees Report 33 be adopted and the remainder of the Report be filed.

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HOD ACTION: Recommendation in Board of Trustees Report 33 adopted and the remainder of the Report filed.

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The Board of Trustees recommends that the following be adopted and the remainder of the report be filed:

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That AMA policy D-405.969 be rescinded as having been accomplished by this report (Rescind HOD Policy).

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Testimony provided by the Board of Trustees indicates that this report was written as an update to Board of Trustees Report 9-I-22. The employed physician caucus created by the Organized Medical Staff Section (OMSS) was identified as the most appropriate means for providing a voice to employed physicians within the AMA. Board of Trustees Report 33 further describes the establishment and activity of the OMSS-convened employed physician caucus.

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Limited testimony noted that the employed physician caucus convened at the 2024 Annual meeting.

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Further, this report accomplishes AMA policy D-405.969 and calls for this policy be rescinded. Your Reference Committee recommends adoption of Board of Trustees Report 33.

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

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RECOMMENDATION:

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Reference Committee Madam Speaker, your recommends that the recommendations 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.

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HOD ACTION: Recommendations in the Report of the House of Delegates Committee on the Compensation of the Officer adopted and the remainder of the Report filed.

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The Committee on Compensation of the Officers recommends the following recommendation be adopted and the remainder of this report be filed:

- 1. That the secretarial reimbursement be increased to \$1,125 effective January 1, 2025.
- 2. That there be no changes to Officers' compensation for the period beginning July 1, 2024 through June 30, 2025.
- 3. That the remainder of the report be filed.

Beyond the introduction of the Report of the House of Delegates Committee on the Compensation of the Officers, no further testimony was received.

Your Reference Committee extends its appreciation to the committee for the report and agrees with the proffered recommendations.

(8) SPEAKERS REPORT 1 - REPORT OF THE RESOLUTION MODERNIZATION TASK FORCE UPDATE

RECOMMENDATION:

Madam Speaker, your Reference Committee recommends that the Recommendations in Speakers Report 1 be <u>adopted</u> and the remainder of the Report be filed.

HOD ACTION: Recommendations in Speakers Report 1 <u>adopted as amended by addition</u> and the remainder of the Report <u>filed</u>.

- The bylaws be amended so that the resolution submission deadline be 45 days prior to the Opening Session of the House of Delegates with AMA Sections excluded from this deadline. (Directive to Take Action)
- 2. The bylaws be amended so that the definition of a late resolution shall be all resolutions submitted after the resolution submission deadline with AMA Sections excluded from the deadline and prior to the beginning of the Opening Session of the House of Delegates. (Directive to take Action)

The Resolution Modification Task Force recommends that the following be adopted to be implemented for Interim 2024 and the remainder of the report be filed:

1. The bylaws be amended so that the resolution submission deadline be 45 days prior to the Opening Session of the House of Delegates. (Directive to take Action)

- 2. The bylaws be amended so that the definition of a late resolution shall be all resolutions submitted after the resolution submission deadline and prior to the beginning of the Opening Session of the House of Delegates. (Directive to take Action)
- 3. The bylaws be amended so that the definition of an emergency resolution shall be all resolutions submitted after the beginning of the Opening Session of the House of Delegates. (Directive to take Action)
- 4. The bylaws be amended so that the term of committees of the House of Delegates shall commence upon their formation and shall conclude at the end of the meeting for which they were appointed, unless otherwise directed by the House of Delegates. (Directive to take Action)
- That our AMA will convene Online Reference Committee Hearings prior to each House of Delegates meeting. These hearings shall open 10 days following the resolution submission deadline and remain open for 21 days. This shall be accomplished in lieu of Policy G-38 600.045. (New HOD Policy)
- 6. Prior to House of Delegates meetings, reference committees will convene after the close of the Online Reference Committee Hearings to develop a Preliminary Reference Committee Report. These reports shall include preliminary recommendations and will serve as the agenda for the in-person reference committee hearing. This shall be accomplished in lieu of Policy G-600.060(8). (New HOD Policy)
- 7. That Policy D-600.956 be rescinded. (Rescind HOD Policy)

Testimony was generally supportive of the Speakers' Report 1 noting that similar process contributed to an enhanced policymaking experience within their medical societies. However, there were mixed sentiments regarding some of the report recommendations.

Testimony expressed concern that Recommendation 1, which calls for a resolution submission deadline of 45 days prior to the Opening Session of the House of Delegates, could disenfranchise our AMA Sections and some medical societies from partaking in the resolution process.

Testimony on Recommendation 2 was mixed. Recommendation 2 calls for a Bylaws amendment redefining late resolutions. There was concern that this change would create hurdles for having resolutions considered by the House of Delegates. Other Online Forum participants expressed support for this proposed change.

Recommendation 6 calls for the development of a Preliminary Reference Committee Report, which will include preliminary recommendations that will serve as the agenda for the in-person reference committee hearing. Supportive comments indicated that the Preliminary Reference Committee Report would create an opportunity for more robust testimony and mitigate barriers to presenting testimony on various items. Opposing commentary expressed concern that an anchoring bias could be introduced, repetitive statements would be presented online and in-person, and reference committee recommendations may not reflect the totality of testimony. It was further noted that focus on the onsite reference committee hearings could shift to debating the recommendations in the Preliminary Reference Committee Report, rather than the policy issues.

Although various amendments were proffered, your Reference Committee heard the appeal of the Speaker and the Resolution Modernization Task Force to try the new process first and make future adjustments as needed. The Speaker provided reassurance that resolutions would receive fair consideration in light of the timing for their resolution development processes.

Based on the testimony provided, your Reference Committee recommends that Speakers' Report 1 be adopted.

 (9) COUNCIL ON CONSTITUTION AND BYLAWS/COUNCIL ON LONG RANGE PLANNING AND DEVELOPMENT REPORT 1 - JOINT COUNCIL SUNSET REVIEW OF 2014 HOUSE POLICIES

RECOMMENDATION:

Madam Speaker, your Reference Committee recommends that the Recommendation in Council on Constitution and Bylaws/Council on Long Range Planning and Development Report 1 be <u>adopted</u> and the remainder of the Report be filed.

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

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

Beyond introduction of the Councils on Constitution and Bylaws and Long Range Planning and Development Report 1 by the author, no other testimony was received.

Your Reference Committee recommends adoption of the Council on Constitution and Bylaws/Council on Long Range Planning and Development Report 1.

(10) COUNCIL ON LONG RANGE PLANNING AND DEVELOPMENT REPORT 1 - ESTABLISHMENT OF A LGBTQ+ SECTION

RECOMMENDATION:

 Madam Speaker, your Reference Committee recommends that the Recommendations in Council on Long Range Planning and Development Report 1 be adopted and the remainder of the Report be filed.

HOD ACTION: Recommendations in Council on Long Range Planning and Development Report 1 adopted and the remainder of the Report filed.

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

1. That our American Medical Association transition the Advisory Committee on Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ+) Issues to the LGBTQ+ Section as a delineated section. (Directive to Take Action)

2. That our AMA develop bylaw language to recognize the LGBTQ+ Section. (Directive to Take Action)

There was limited but supportive testimony for the Council on Long Range Planning and Development Report 1.

Your Reference Committee extends its appreciation to the council for its comprehensive report, and your Reference Committee is pleased to have a role in facilitating the creation of a new AMA Section that will serve to represent LGBTQ+ issues.

(11) RESOLUTION 602 - RANKED CHOICE VOTING

RECOMMENDATION:

 Madam Speaker, your Reference Committee recommends that Resolution 602 be <u>adopted</u>.

HOD ACTION: Resolution 602 adopted.

 RESOLVED, that our American Medical Association study ranked choice voting for all elections within the House of Delegates. (Directive to Take Action)

Testimony on the proposed study of ranked choice voting for AMA elections generated a mixed response. Those opposed indicated there is minimal evidence that the current system is problematic. Further testimony indicated that ranked choice voting may not eliminate the need for runoff elections in every scenario.

For the reasons elucidated by the testimony, your Reference Committee believes a study would be beneficial to understanding the implications of potentially migrating to a new voting process; therefore, your Reference Committee favors adoption of Resolution 602 for the purpose of securing the requested study.

(12) RESOLUTION 609 - STANDARDIZATION OF THE ENDORSEMENT PROCESS

RECOMMENDATION:

Madam Speaker, your Reference Committee recommends that Resolution 609 be <u>adopted</u>.

HOD ACTION: Resolution 609 adopted.

RESOLVED, that our American Medical Association require all groups that endorse candidates turn in information about their endorsement process, the deadline, and a staff contact for applications in a timely and streamlined manner (New HOD Policy); and be it further

RESOLVED, that our AMA then post this information on the election website in a timely manner, with the information being easily digestible and accessible (Directive to Take Action); and be it further

RESOLVED, that our AMA not allow any group that fails to provide this information in a timely manner to offer an endorsement during that election cycle (New HOD Policy); and be it further

RESOLVED, that our AMA create a specific period (similar to virtual elections) during which endorsements may be sought. (New HOD Policy)

Your Reference Committee received limited testimony in response to Resolution 609, but was positively influenced by testimony calling for parity among candidates with varying degrees of administrative support.

Your Reference Committee therefore recommends that Resolution 609 be adopted.

RECOMMENDED FOR ADOPTION AS AMENDED

1	(13)	BOARD OF TRUSTEES REPORT 25 - ENVIRONMENTAL
2	` '	SUSTAINABILITY OF AMA NATIONAL MEETINGS.
3		SUPPORTING CARBON OFFSET PROGRAMS FOR
4		TRAVEL FOR AMA CONFERENCES
5		RESOLUTION 605 - WALKING THE WALK OF CLIMATE
6		CHANGE
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8		RECOMMENDATION A:

Madam Speaker, your Reference Committee recommends that the Recommendations in Board of Trustees Report 25 be <u>amended by addition and deletion</u> to read as follows:

The Board of Trustees recommends that the following be adopted in lieu of Resolutions 603-A-23 and 608-A-23, and that the remainder of the report be filed:

 Our AMA is committed to progression to net zero emissions for its business operations by 2030, by continuing and expanding energy efficiency upgrades, waste reduction initiatives, and the transition to renewable energy sources (New HOD Policy).

2. Our AMA will prioritize sustainable organizational practices to reduce emissions ever purchasing carbon offsets (New HOD Policy).

3. Our AMA Board of Trustees will present a report at the 2024 Interim Meeting that details a timeline as to when and how to achieve our organizational carbon neutrality. (Directive to Take Action)

34. Our AMA will continue to prioritize collaboration within the health care community by sharing the learnings from our sustainability initiative to inspire our peer organizations to follow suit and adopt similar environmentally conscious practices (Directive to Take Action).

5. Our AMA will work with appropriate entities to encourage the United States healthcare system to decrease emissions to half of 2010 levels by 2030, achieve net zero by 2050, and remain net zero or negative (Directive to Take Action).

RECOMMENDATION B:

 Madam Speaker, your Reference Committee recommends that the Recommendations in Board of Trustees Report 25 be <u>adopted as amended in lieu of Resolution 605</u> and the remainder of the Report be <u>filed</u>.

RECOMMENDATION C:

Madam Speaker, your Reference Committee recommends that the title of Board of Trustees Report 25 be <u>changed</u> to read as follows:

ENVIRONMENTAL SUSTAINABILITY OF AMA NATIONAL MEETINGS

HOD ACTION: Recommendations in Board of Trustees Report 25 <u>adopted as amended in lieu of Resolution 605</u> and the remainder of the Report <u>filed</u> with a changed title.

ENVIRONMENTAL SUSTAINABILITY OF AMA NATIONAL MEETINGS

Board of Trustees Report 25

The Board of Trustees recommends that the following be adopted in lieu of Resolutions 603-A-23 and 608-A-23, and that the remainder of the report be filed:

1. Our AMA is committed to progression to net zero emissions for its business operations by 2030, by continuing and expanding energy efficiency upgrades, waste reduction initiatives, and the transition to renewable energy sources (New HOD Policy).

Our AMA will prioritize sustainable organizational practices to reduce emissions over purchasing carbon offsets (New HOD Policy).

 Our AMA will continue to prioritize collaboration within the health care community by sharing the learnings from our sustainability initiative to inspire our peer organizations to follow suit and adopt similar environmentally conscious practices (Directive-to-Take-Action).

Resolution 605

 RESOLVED, that our American Medical Association Board of Trustees present to the House of Delegates at Interim 2024 a detailed timeline as to when and how to achieve our organizational carbon neutrality (Directive to Take Action); and be it further

RESOLVED, that our AMA staff study AMA-related corporate travel with respect to minimizing carbon emissions and/or mitigating or off-setting such emissions (Directive to Take Action); and be it further

RESOLVED, that our AMA adopt a policy for plant-based menus as the default option when planning meeting venues with an opt-out alternative as appropriate. (Directive to Take Action)

Testimony in response to Board of Trustees Report 25 was generally supportive and suggested that the report addresses the issues raised in Resolution 605; however, some who testified believe that the report did not devote sufficient discussion and consideration to purchasing carbon offsets and this should not be overlooked, which is the basis for the amendment by deletion in Recommendation 2.

 Your Reference Committee received testimony that the third Resolve contained in Resolution 605 to offer plant-based menus as the default option was not widely accepted. Your Reference Committee notes that our AMA meeting registration allows accommodations for dietary restrictions.

 Finally, testimony was supportive of additional recommendations calling for plan transparency by the 2024 Interim Meeting, as well as actionable goals for our AMA to lead by example in promoting environmental stewardship.

(14) BOARD OF TRUSTEES REPORT 35 - MITIGATING THE COST OF MEDICAL STUDENT PARTICIPATION IN AMA MEETINGS

RECOMMENDATION A:

Madam Speaker, your Reference Committee recommends that the Recommendations in Board of Trustees Report 35 be <u>amended by addition and</u> deletion to read as follows:

 That our AMA will explore alternate mechanisms to provide financial assistance to facilitate attendance at MSS meetings with a report back in A-26 at the 2025 Annual Meeting.

RECOMMENDATION B:

Madam Speaker, your Reference Committee recommends that the Recommendations in Board of Trustees Report 35 be <u>adopted as amended</u> and the remainder of the Report be <u>filed</u>.

HOD ACTION: Recommendations in Board of Trustees Report 35 <u>adopted as further amended by deletion</u> and the remainder of the Report <u>filed</u>.

4. That AMA policy G-615.103 (4) be rescinded.

The Board of Trustees recommends that the following be adopted and the remainder of the report be filed:

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- That our AMA will promote the value of membership and meeting attendance to encourage financial support by medical schools and other funding sources.
- 2. That our AMA will explore mechanisms to mitigate the cost of meeting attendance for medical students.
- 3. That our AMA will explore alternate mechanisms to provide financial assistance to facilitate attendance at MSS meetings with a report back in A-26.
- 4. That AMA policy G-615.103 (4) be rescinded.

Testimony presented by our AMA Board of Trustees indicated that while AMA has made available additional travel funding in the two years since the adoption of the policy directing this report, alternatives for funding student travel costs need to be further explored and needs to consider factors such as potential tax implications for the AMA and for medical students, as well as critical ties between medical students and their Federation organizations. Our Board indicated more time is needed to fully research medical student funding options, and our Board acknowledged the urgency expressed by the testimony by agreeing to an earlier report back to be presented at the 2025 Annual Meeting.

Your Reference Committee believes our Board of Trustees should be allowed the time needed to make a informed decision that is in the best interest of our AMA and our medical student meeting participants.

RESOLUTION 601 - ANNUAL HOLOCAUST (15)REMEMBRANCE EVENT

RECOMMENDATION A:

Committee Madam Speaker. vour Reference recommends that Resolution 601 be amended by addition and deletion to read as follows:

RESOLVED, that our American Medical Association provide educational materials host an annual event in support of International Holocaust Remembrance Day (January 27) to provide education to physicians and medical trainees about the role of physicians in the Holocaust, and other human rights atrocities, and the role this played in developing the current Code of **Medical Ethics. (Directive to Take Action) RECOMMENDATION B:**

Speaker. Reference Committee Madam vour recommends that Resolution 601 be adopted as amended.

RECOMMENDATION C:

 Madam Speaker, your Reference Committee recommends that the title of Resolution 601 be <u>changed</u> to read as follows:

HOLOCAUST REMEMBERANCE

HOD ACTION: Resolution 601 <u>adopted as amended</u> with a <u>changed title</u>.

HOLOCAUST REMEMBERANCE

RESOLVED, that our American Medical Association host an annual event in support of International Holocaust Remembrance Day (January 27) to provide education to medical trainees about the role of physicians in the Holocaust. (Directive to Take Action)

Testimony offered by the resolution author stated that "medical involvement in the Holocaust has profoundly influenced contemporary medical ethics." It was noted that history is not generally prioritized in medical education, and a limited number of medical schools allow curricular time to learn about the role of physicians in the Holocaust and its implications.

Although testimony was overwhelmingly supportive of the intent of Resolution 601, there was some disagreement on the implementation of an Annual Holocaust Remembrance Event. Thus, the Texas Delegation proffered an amendment:

RESOLVED, that our American Medical Association <u>encourage education</u> <u>for all physicians and learners by supplying information on host an annual event in support of International Holocaust Remembrance Day (January 27) in reference to the participation to provide education to medical trainees about the role of physicians in the Holocaust <u>and the role this played in developing the current code of medical ethics, with a goal of preventing this from happening again</u>. (Directive to Take Action)</u>

While the resolution author was supportive of the Texas amendment, reception for the amended language was mixed noting that a curriculum schedule change may not be required as asynchronous learning is commonplace. Some Online Forum participants shared that an AMA produced event could be recorded as a resource for medical schools, residency programs, and continuing medical education.

Other Online Forum participants noted support for the intent of the Texas amendment and one in particular indicated that additional educational resources, including a webinar, could be produced for additional learning on this history and its relevance for today and for the future.

Testimony also noted that this education should incorporate other human rights atrocities such as the U.S. Public Health Service Untreated Syphilis Study at Tuskegee. Additional testimony indicated that the Holocaust was the foundation for the Declaration of Helsinki, which provides a statement of ethical principles for medical research involving human subjects.

Based on testimony, your Reference Committee recommends that Resolution 601 be adopted as amended.

(16) RESOLUTION 604 - CONFRONTING AGEISM IN MEDICINE

RECOMMENDATION A:

Madam Speaker, your Reference Committee recommends that the third Resolve of Resolution 604 be amended by addition and deletion to read as follows:

RESOLVED, that our AMA <u>will</u> review all existing policy and amend <u>policies</u> regarding discrimination, bias and microaggressions, and add age or ageism <u>if not already mentioned during the sunset review process</u> (Directive to Take Action); and be it further

RECOMMENDATION B:

Madam Speaker, your Reference Committee recommends that Resolution 604 be <u>adopted as</u> amended.

HOD ACTION: Resolution 604 adopted as amended.

RESOLVED, that our American Medical Association adopt the following definition of ageism based on the World Health Organization (WHO) and AGE Platform Europe: "Ageism refers to the stereotypes (how we think), prejudice (how we feel) and discrimination (how we act) towards others or oneself based on age; structural ageism is the way in which society and its institutions sustain ageist attitudes, actions or language in laws, policies, practices or culture" (New HOD Policy); and be it further

RESOLVED, that our AMA establish a definition of "age equity," and consider adoption of the AGE Platform Europe vision: "Age equity is an inclusive society, based on well-being for all, solidarity between generations and full entitlement to enjoy life, participate in and contribute to society. At the same time, each person's rights and responsibilities throughout their life course have to be fully respected" (Directive to Take Action); and be it further

RESOLVED, that our AMA review all existing policy regarding discrimination, bias and microaggressions, and add age or ageism if not already mentioned (Directive to Take Action); and be it further

RESOLVED, that our AMA routinely incorporate intersectional approaches to ageism (Directive to Take Action); and be it further

 RESOLVED, that our AMA conduct ongoing (1) advocacy for hospital and regulatory policy changes focused on individual physicians' care quality data rather than their age; and (2) educational outreach to AMA members (i.e. starting with a Prioritizing Equity episode panel discussion to be posted on Ed Hub $^{\text{TM}}$ for CME, as a video and podcast, and promoted through the UCEP/GCEP channels) (Directive to Take Action); and be it further

RESOLVED, that our AMA work with the World Medical Association (WMA) and other interested stakeholders to have AMA's work significantly inform the global health organization's work on ageism. (Directive to Take Action)

Supportive testimony noted that ageism is an important issue impacting physicians from various age groups and concurred that this topic should be included in AMA efforts related to diversity, equity, and inclusion.

The third Resolve calls for a review of all existing policy regarding discrimination, bias and microaggressions, and add age or ageism. Testimony noted that the existing sunset review process can be used while lowering the significant fiscal note.

Based on testimony, your Reference Committee recommends that Resolution 604 be adopted as amended.

(17) RESOLUTION 606 - CREATION OF AN AMA COUNCIL WITH A FOCUS ON DIGITAL HEALTH TECHNOLOGIES AND AI

RECOMMENDATION A:

Madam Speaker, your Reference Committee recommends that Resolution 606 be amended by addition and deletion to read as follows:

RESOLVED, that our American Medical Association establish a task force by I-24 define and propose a new AMA council focused on digital health, technology, informatics, and augmented/artificial intelligence with the potential to transition this task force to a council, whose members shall be elected by the House of Delegates, for presentation and constitution at the 2025 Annual Meeting. (Directive to Take Action)

RECOMMENDATION B:

Madam Speaker, your Reference Committee recommends that Resolution 606 be <u>adopted as amended</u>.

HOD ACTION: Resolution 606 adopted as amended.

RESOLVED, that our American Medical Association define and propose a new AMA council focused on digital health, technology, informatics, and augmented/artificial intelligence, whose members shall be elected by the House of Delegates, for presentation and constitution at the 2025 Annual Meeting. (Directive to Take Action)

Testimony was mixed regarding this topic. Supportive testimony indicated that a centralized group of physicians is needed to consider the implications of digital health technology and inform AMA advocacy and activities. Those in opposition indicated that there are existing opportunities to convene members while minimizing fragmentation within the AMA. Varying perspectives were presented on the best avenue for this work (e.g., task force, ad hoc committee, existing AMA council, etc.).

During testimony, various questions related to the cost and composition of a new council were raised: selection process for committee members, size of committee, and level of staff support.

Your Reference Committee heard concern that our AMA needs to be more expeditious in its efforts to lead on this issue. Therefore, your Reference Committee recommends the establishment of a task force by the 2024 Interim Meeting with the potential to transition to a council so that efforts will be ongoing.

(18) RESOLUTION 608 - THE AMERICAN MEDICAL ASSOCIATION DIVERSITY MENTORSHIP PROGRAM

RECOMMENDATION A:

Madam Speaker, your Reference Committee recommends that Resolution 608 be <u>amended by addition</u> to read as follows:

RESOLVED, that our American Medical Association establish a diversity mentorship program to connect volunteer mentors with residents, fellows, and medical student mentees who are underrepresented in medicine (Directive to Take Action); and be it further

RESOLVED, that the AMA encourages state, county, and specialty medical societies to develop mentorship programs that encourage people from underrepresented groups to pursue careers in medicine (Directive to Take Action).

RECOMMENDATION B:

Madam Speaker, your Reference Committee recommends that Resolution 608 be <u>adopted as</u> amended.

HOD ACTION: Resolution 608 adopted as amended.

RESOLVED, that our American Medical Association establish a diversity mentorship program to connect volunteer mentors with residents, fellows, and medical student mentees who are underrepresented in medicine. (Directive to Take Action)

Testimony was overwhelmingly supportive of Resolution 608 and commended the authors for bringing forward this resolution. Many of those testifying shared their experiences and concurred that mentorship plays an important role in supporting medical students and reaffirms the AMA's commitment to diversity, equity, and inclusion. It was further noted that a mentorship program focused on diversity in medicine will enhance the educational experience for students from historically marginalized backgrounds and nurture a health care environment that is inclusive and equitable for physicians and patients.

An additional Resolve clause was proffered to broaden the resolution's scope:

RESOLVED, that the AMA encourages state, county, and specialty medical societies to develop mentorship programs that encourage people from underrepresented groups to pursue careers in medicine.

A similar amendment was submitted during the Online Forum testimony. Your Reference Committee favored the in-person amendment and recommends that Resolution 608 be adopted as amended.

RECOMMENDED FOR ADOPTION IN LIEU OF

1 2 3 4	(19)	RESOLUTION 603 -END ATTACKS ON HEALTH AND HUMAN RIGHTS IN ISRAEL AND PALESTINE RESOLUTION 610 - OPPOSITION TO COLLECTIVE PUNISHMENT
5 6 7		RECOMMENDATION A:
7 8 9 10 11		Madam Speaker, your Reference Committee recommends that Alternate Resolution 603 be <u>adopted in lieu of</u> Resolution 603 and Resolution 610.
12 13 14 15		RESOLVED, that our AMA supports peace in Israel and Palestine in order to protect civilian lives and healthcare personnel (New HOD Policy); and be it further
17 18 19 20 21		RESOLVED, that our AMA supports the safety of healthcare and humanitarian aid workers along with safe access to healthcare, healthcare facilities, and humanitarian aid for all civilians in areas of armed conflict (New HOD Policy); and be it further
22 23 24 25		RESOLVED, that our AMA reaffirm AMA Policy D-65.993, War Crimes as a Threat to Physicians' Humanitarian Responsibilities. (Reaffirm HOD Policy)
26 27 28		RECOMMENDATION B:
29 30 31 32		Madam Speaker, your Reference Committee recommends that the title of Resolution 603 be <u>changed</u> to read as follows:
33 34 35		PROTECTION OF HEALTHCARE AND HUMANITARIAN AID WORKERS IN ALL AREAS OF ARMED CONFLICT
36 37 38 39		HOD ACTION: Alternate Resolution 603 <u>adopted in lieu</u> of Resolution 603 and Resolution 610 with a <u>changed title</u> .
40 41 42		PROTECTION OF HEALTHCARE AND HUMANITARIAN AID WORKERS IN ALL AREAS OF ARMED CONFLICT

1 Resolution 603

RESOLVED, that our American Medical Association supports a ceasefire in Israel and Palestine in order to protect civilian lives and healthcare personnel. (New HOD Policy)

Resolution 610

RESOLVED, that our American Medical Association (AMA) oppose collective punishment tactics—including restrictions on access to food, water, electricity, and healthcare—as tools of war; and be it further

RESOLVED, that our AMA oppose the use of United States funding to any entities that (1) do not uphold international law; or (2) commit or condone war crimes; and be it further RESOLVED, that our AMA condemn the use of United States resources to enforce collective punishment on civilians, including in Gaza; and be it further

RESOLVED, that our AMA advocate for federal funding and support for national and international agencies and organizations that provide support for refugees, such as the United Nations High Commissioner for Refugees (UNHCR) and the United Nations Reliefs and Works Agency for Palestinian Refugees in the Near East (UNRWA).

Testimony in response to Resolutions 603 and 610 was collegial, passionate, and mixed.

Those in support stated:

- Our AMA should advocate for protecting patients and healthcare workers in conflict zones.
- Our AMA plays a role in global health and human rights.
- Physicians have a responsibility to speak against war and its impacts on health.
- Our AMA needs to recognize the importance of addressing the United States' role in funding the conflict and its impact on healthcare.
- Our AMA featured an article calling for a ceasefire in the Ukraine in April 2022.

Those opposed indicated:

- The issue is beyond our AMA's purview; focus on issues relevant to our mission.
- Our AMA should not engage in geopolitical issues, which could divide the membership and have no tangible impact.
- The resolutions divert resources and credibility from our AMA's core issues.
- The AMA is a member of the World Medical Association, which issued a resolution on the protection of healthcare in Israel and Gaza in April 2024.

Your Reference Committee agrees with testimony indicating that our AMA should support the safety of healthcare and humanitarian aid workers, along with safe access to healthcare, healthcare facilities, and humanitarian aid for all civilians in areas of armed conflict.

Your Reference Committee recommends reaffirmation of AMA Policy D-65.993, War Crimes as a Threat to Physicians' Humanitarian Responsibilities, which addresses the concerns raised in testimony.

Our AMA will (1) implore all parties at all times to understand and minimize the health costs of war on civilian populations generally and the adverse effects of physician persecution in particular, (2) support the efforts of physicians around the world to practice medicine ethically in any and all circumstances, including during wartime, episodes of civil strife, or sanctions and condemn the military targeting of health care facilities and personnel and using denial of medical services as a weapon of war, by any party, wherever and whenever it occurs, and (3) advocate for the protection of physicians' rights to provide ethical care without fear of persecution.

RECOMMENDED FOR NOT ADOPTION

(20) RESOLUTION 607 - APPEALING TO OUR AMA TO ADD CLARITY TO ITS MISSION STATEMENT TO BETTER MEET THE NEED OF PHYSICIANS, THE PRACTICE OF MEDICINE AND THE PUBLIC HEALTH

RECOMMENDATION:

Madam Speaker, your Reference Committee recommends that Resolution 607 <u>not be adopted</u>.

HOD ACTION: Resolution 607 not adopted.

RESOLVED, that our American Medical Association amends its mission's statement from "to promote the art and science of medicine and the betterment of public health" to "to empower physicians to better care for their patients, advance the art and science of medicine, and promote the betterment of physicians and the public health." (Directive to Take Action)

Testimony in response to Resolution 607 was generally opposed, and the authors indicated referral for study would be acceptable; however, your Reference Committee does not believe a study would overcome the opposing sentiment indicating that:

the current mission statement is short and to the point;
mission statements do not drive membership; and

• promoting physicians above others might be viewed negatively.

Your Reference Committee therefore recommends that Resolution 607 not be adopted.

RECOMMENDED FOR FILING

RECOMMENDATION:

 Madam Speaker, your Reference Committee recommends that Board of Trustees Report 1 be <u>filed</u>.

HOD ACTION: Board of Trustees Report 1 filed.

 The Consolidated Financial Statements for the years ended December 31, 2023 and 2022 and the Independent Auditor's report have been included in the 2023 Annual Report. This is included in the Handbook mailing to members of the House of Delegates and will be discussed at the Reference Committee F hearing.

Our AMA Board of Trustees highlighted activities related to the AMA Recovery Plan, namely physician burnout and prior authorization, along with the 2023 consolidated financial results. Our Board of Trustees noted that the financial condition of our AMA remains strong with having a reserve portfolio of one billion dollars, which is crucial to preserving the short- and long-term viability of the Association.

Your Reference Committee recommends that the 2023 Annual Report be filed.

(22) BOARD OF TRUSTEES REPORT 27 - AMA
REIMBURSEMENT OF NECESSARY HOD BUSINESS
MEETING EXPENSES FOR DELEGATES AND
ALTERNATES

RECOMMENDATION:

Madam Speaker, your Reference Committee Recommends that Board of Trustees Report 27 be <u>filed</u>.

HOD ACTION: Board of Trustees Report 27 <u>adopted</u> <u>as amended by addition of a recommendation</u>.

RECOMMENDATION

The AMA Board of Trustees, with input from Federation medical society physicians and staff members, will present a comprehensive report at I-24 that presents options for reducing the costs of meetings and mechanisms to provide financial support (including reimbursement of necessary business expenses or grants) for Delegates and Alternate Delegates who are credentialed to participate in our House of Delegates.

At the 2023 Annual Meeting of the AMA House of Delegates (HOD) Resolution 606, "AMA Reimbursement of Necessary HOD Business Meeting Expenses for Delegates and Alternates" was referred to the Board of Trustees for a report back to the HOD. The reference committee heard mixed testimony, including compelling testimony from the Board of Trustees regarding their fiduciary responsibility to our AMA and the need to allow sufficient time to identify and fully assess the impact on our AMA.

Board of Trustees Report 27 indicates that the AMA will continue to study options for strengthening state and specialty society participation in House of Delegates meetings. Testimony voiced concerns over budget constraints impacting participation and potential equity issues as some may be excluded due to lack of financial support.

While the Board of Trustees empathized with these concerns, it noted that this issue is complex given potential legal and financial implications. Matters under consideration encompass criteria to determine need-based support, development of a reimbursement process in lieu of payment to attend HOD meetings, and alternative options for participation.

The Board of Trustees requested additional time to explore appropriate solutions to facilitate participation and present its findings in a report back to the House of Delegates at the 2025 Annual Meeting.

Your Reference Committee recommends that this informational Board of Trustees report be filed.

- 1 Madam Speaker, this concludes the report of Reference Committee F. I would like to thank
- 2 Brooks F. Bock, MD, Robyn F. Chatman, MD, MPH, Robert A. Gilchick, MD, MPH,
- 3 Richard F. Labasky, MD, MBA, Brandi N. Ring, MD, MBA, Michael B. Simon, MD, MBA,
- 4 and all those who testified before the Committee.

Brooks F. Bock, MD Richard F. Labasky, MD, MBA American College of Emergency Utah Physicians Brandi N. Ring, MD, MBA Robyn F. Chatman, MD, MPH American College of Obstetricians and Ohio Gynecologists Robert A. Gilchick, MD, MPH Michael B. Simon, MD, MBA American College of Preventive American Society of Anesthesiologists Medicine Rebecca L. Johnson, MD Florida

Chair