

Follow-Up on Implementation of Resolutions and Report Recommendations AMA House of Delegates Meeting- November 2022

Report/Resolution	Title	House Action	Status
BOT Report 01-I-22	Opposition to Requirements for Gender-Based Treatments for Athletes	Recommendations in Board of Trustees Report 1 Adopted as Amended and remainder of Report filed.	AMA Policy Database has been updated.
BOT Report 02-I-22	Further Action to Respond to the Gun Violence Public Health Crisis	Recommendations in Board of Trustees Report 2 Adopted as Amended and the Remainder of Report Filed.	<p>Recommendation 1: On December 13, 2022, our AMA posted a summary of firearm-related policies and advocacy efforts on the AMA website.</p> <p>Recommendation 5: A Board report will be drafted and submitted for the I-23 HOD Meeting.</p> <p>A Board report on this subject will be prepared for consideration by the House of Delegates at the 2024 Annual Meeting.</p>
BOT Report 03-I-22	Delegate Apportionment and Pending Members	Referred.	<p>Board of Trustees Report 13-A-23 on this subject appears in the Delegates Handbook for the 2023 Annual Meeting. (Reference Committee F)</p> <p>HOD Action: Recommendations in BOT Report 13-A-23 Adopted, Remainder of Report Filed.</p>
BOT Report 04-I-22	Preserving Access to Reproductive Health Services	Recommendations in Board of Trustees Report 4 Adopted and the remainder of the Report filed.	Our AMA has participated in federal litigation through the filing of amicus briefs supporting access to reproductive health care in several pending cases that are working their way through the lower federal courts in Texas and the state of Washington.
BOT Report 05-I-22	Towards Diversity and Inclusion: A Global Nondiscrimination Policy Statement and Benchmark for our AMA	Recommendations in Board of Trustees Report 5 Adopted and the remainder of the Report filed.	AMA Policy Database has been updated.
BOT Report 07-I-22	Transparency of Resolution Fiscal Notes	Recommendation in Board of Trustees Report 7 Adopted and the Remainder of Report Filed.	No action required.
BOT Report 09-I-22	Employed Physicians	Referred.	<p>A Board of Trustees Report on this subject will appear in the Delegates Handbook for the 2023 Interim Meeting.</p> <p>BOT Report 01-I-23 appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee C&B)</p>

Report/Resolution	Title	House Action	Status
BOT Report 14-I-22	Specialty Society Representation in the House of Delegates - Five-Year Review	Recommendations in BOT Report 14-I-22 Adopted, Remainder of Report Filed.	
CCB Report 01-I-22	Updated Bylaws: Delegate Apportionment and Pending Members	Recommendations in Council on Constitution and Bylaws Report 1 Referred and the Remainder of the Report filed.	Board of Trustees Report 13-A-23 on this subject appears in the Delegates Handbook for the 2023 Annual Meeting. (Reference Committee F) HOD Action: Recommendations in BOT Report 13 Adopted, Remainder of Report Filed.
CEJA Report 01-I-22	Amendment to Opinion 4.2.7, Abortion	Recommendations in Council on Ethical and Judicial Affairs Report 1 Adopted and the Remainder of the Report filed.	AMA Policy Database has been updated.
CEJA Report 02-I-22	Amendment to E-10.8, Collaborative Care	Recommendation in Council on Ethical and Judicial Affairs Report 2 Adopted as Amended and the remainder of the Report filed.	AMA Policy Database has been updated.
CEJA Report 03-I-22	Pandemic Ethics and the Duty of Care	Recommendation in Council on Ethical and Judicial Affairs Report 3 Adopted and the remainder of the Report filed.	AMA Policy Database has been updated.
CLRPD Report 01-I-22	Senior Physicians Section Five-Year Review	Recommendation in Council on Long Range Planning and Development Report 1 Adopted and the remainder of the Report filed.	

Report/Resolution	Title	House Action	Status
CME Report 01-I-22	The Impact of Private Equity on Graduate Medical Education	Recommendation in Council on Medical Education Report 1 Adopted and the remainder of the Report filed.	<p>Letters were sent to the leadership of the Accreditation Council for Graduate Medical Education, Association of American Medical Colleges, American Association of Colleges of Osteopathic Medicine, American Board of Medical Specialties, American Hospital Association, American Osteopathic Association and Council of Medical Specialty Societies to notify them of new AMA policy encouraging GME training institutions, programs, and relevant stakeholders to: a. demonstrate transparency on mergers and closures, especially as it relates to private equity acquisition of GME programs and institutions, and demonstrate institutional accountability to their trainees by making this information available to current and prospective trainees; b. uphold comprehensive policies which protect trainees, including those who are not funded by Medicare dollars, to ensure the obligatory transfer of funds after institution closure; c. empower designated institutional officials (DIOs) to be involved in institutional decision-making to advance such transparency and accountability in protection of their residents, fellows, and physician faculty; d. develop educational materials that can help trainees better understand the business of medicine, especially at the practice, institution, and corporate levels; e. develop policies highlighting the procedures and responsibilities of sponsoring institutions regarding the unanticipated catastrophic loss of faculty or clinical training sites and make these policies available to current and prospective GME learners. The letter also encourages physician associations, boards, and societies to draft policy or release their own issue statements on private equity to heighten awareness among the physician community.</p> <p>New policy information was included in an AMA update to the ACGME Board of Directors and Review Committees. Since I-22, the AMA has released the following media stories on private equity as it relates to trainees: address private equity's growing impact on residency training; AMA adopts policy protecting students from private equity impact in schools; and account for all facets of GME value when considering funding.</p> <p>A resolution has been submitted to the HOD for the Interim 2023 meeting by individual members of the Council on Medical Education seeking to amend an error in policy resulting from this report.</p> <p>RESOLVED, that our American Medical Association amend Policy D-310.948 “Protection of Resident and Fellow Training in the Case of Hospital or Training Program Closure” by addition and deletion to read as follows:</p> <p>Our AMA: (6) will continue to work with ACGME, interested specialty societies, and others to monitor issues, collect data, and share information related to training programs run by corporate and for-profit entities and their effect on medical education. (Modify HOD Policy).</p> <p>A manuscript is in development from this CME report.</p>

Report/Resolution	Title	House Action	Status
CME Report 02-I-22	Mitgating Demographic and Socioeconomic Iniquities in the Residency and Fellowship Selection Process	Recommendations in Council on Medical Education Report 2 Adopted as Amended and the remainder of the Report filed.	In response to Recommendations 2, 3, 4: Letters were sent to the leadership of the Association of American Medical Colleges and the Organization of Program Director Associations to notify them of new AMA policy advocating for residency and fellowship programs to avoid using objective criteria available in the Electronic Residency Application Service (ERAS) application process as the sole determinant for deciding which applicants to offer interviews; advocating to remove membership in medical honor societies as a mandated field of entry on the Electronic Residency Application Service (ERAS)—thereby limiting its use as an automated screening mechanism—and encourage applicants to share this information within other aspects of the ERAS application; and advocating for and support innovation in the undergraduate medical education to graduate medical education transition, especially focusing on the efforts of the Accelerating Change in Medical Education initiative, to include pilot efforts to optimize the residency/fellowship application and matching process and encourage the study of the impact of using filters in the Electronic Residency Application Service (ERAS) by program directors on the diversity of entrants into residency.
CMS Report 01-I-22	Incentives to Encourage Use of Emergency Departments	Recommendation in Council on Medical Services Report 1 Adopted and the remainder of the Report filed.	AMA Policy Database has been updated.
CMS Report 02-I-22	Corporate Practice of Medicine (Res 721-A-22)	Recommendation in Council on Medical Services Report 2 Adopted as Amended and the remainder of the Report filed.	AMA Policy Database has been updated.
CSAPH Report 01-I-22	Drug Shortage Update	Recommendations in Council on Science and Public Health Report 1 Adopted and the remainder of the Report filed.	AMA Policy Database has been updated.
CSAPH Report 02-I-22	Climate Change and Human Health	Recommendation in Council on Science and Public Health Report 2 Adopted as Amended and the remainder of the Report filed.	AMA Policy Database has been updated.

Report/Resolution	Title	House Action	Status
HOD Comp Cmte I-22	Report of the House of Delegates Committee on the Compensation of the Officers	Recommendations in Report of the HOD Compensation Committee Adopted, Remainder of Report Filed.	Filed.
RES 002-I-22	Assessing the Humanitarian Impact of Sanctions	Alternate Resolution 002-I-22 Adopted in Lieu of Resolutions 002 and 006.	AMA Policy Database has been updated.
RES 003-I-22	Indigenous Data Sovereignty	Adopted as Amended.	AMA Policy Database has been updated.
RES 005-I-22	Strengthening Interview Guidelines for American Indian and Alaska Native Medical School, Residency, and Fellowship Applicants	Adopted.	AMA participates in the ACGME DEI Officers Forum monthly call and raised this issue (of asking about blood quantum). Potential unintended, negative consequences were discussed including (1) the possibility that not asking could result in not knowing how well residency programs are representing students who are from federally recognized tribes and thereby widen the inequity, and (2) the importance of distinguishing those who may identify as Native American but may not have the strong cultural/linguistic ties to those who are enrolled and may be doing it to capitalize on the racial category. The forum has committed to continuing these discussions.
RES 006-I-22	Assessing the Humanitarian Impact of Sanctions	Alternate Resolution 002-I-22 Adopted in Lieu of Resolutions 002 and 006.	See Resolution 002-I-22.
RES 008-I-22	Support for Physicians Practicing Evidence-Based Medicine in a Post Dobbs Era	Adopted as Amended.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. BOT Report 09-I-23 appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee C&B)
RES 009-I-22	Medical Decision-Making Autonomy of the Attending Physician	Referred for Report Back at I-23.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. BOT Report 10-I-23 appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee C&B)
RES 011-I-22	Advocating for the Informed Consent for Access to Transgender Health Care	Referred.	A Board of Trustees Report on this subject will appear in the Delegates Handbook for the 2023 Interim Meeting. A Board of Trustees Report on this subject will appear in the Delegates Handbook for the 2024 Annual Meeting.

Report/Resolution	Title	House Action	Status
RES 012-I-22	Guidelines on Chaperones for Sensitive Exams	Adopted as Amended.	<p>A Council on Ethical and Judicial Affairs Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting.</p> <p>A Council on Ethical and Judicial Affairs Report on this subject will be prepared for consideration by the House of Delegates at the 2024 Annual Meeting.</p>
RES 015-I-22	Restricting Derogatory and Stigmatizing Language of ICD-10 Codes	Adopted as Amended.	<p>Our AMA sent a letter in March 2023 to the ICD-10 Coordination and Maintenance Committee recommending it revise the current International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) to remove derogatory language and adopt destigmatizing terminology. The letter specifically recommends the adoption of revisions made by the World Health Organization in ICD-11 to replace the diagnoses of “transsexualism” and “gender identity disorder” with “gender incongruence” and move the classifications from the mental health chapter. The letter also provides examples of current derogatory language in ICD-10-CM and points to recently published key principles by the Centers for Disease and Prevention for inclusive communication.</p>
RES 016-I-22	Increasing Female Representation in Oncology Clinical Trials	Adopted as Amended.	<p>AMA Policy Database has been updated.</p>
RES 017-I-22	Supervision of Non-Physician Practitioners by Physicians	Adopted as Amended.	<p>Our AMA notified its Federation partners of its readiness to work with any interested states and specialties in advocating to ensure physicians on staff receive written notification when their license is being used to document “supervision” of non-physician practitioners, in addition to advocating that physician supervision should be explicitly defined and mutually agreed upon.</p>
RES 201-I-22	Physician Reimbursement for Interpreter Services	Adopted as Amended.	<p>On January 31, 2023, our AMA sent a letter commenting to the Centers for Medicare & Medicaid Services (CMS) on the Request for Information (RFI) on Essential Health Benefits (EHB). Comments covered a number of topics including limited English proficiency (LEP) individuals and their needed accommodations.</p> <p>On February 13, 2023, our AMA sent a letter on the Medicare Advantage Program that covered a wide variety of topics including recognizing the importance of using medical interpreters as a means of improving the quality of care provided to patients with limited English proficiency (LEP) including patients with sensory impairments and supports that MA organizations and cost plans should cover the full cost of language services; directly pay interpreters; information be included in provider directories must be accurate and complete; and MA plans need to change their incentive structure. Our AMA also notified its Federation partners of its readiness to work with any interested state and/or specialty societies on physician reimbursement for interpreter services, including American Sign Language, for commercial health plans, workers’ compensation plans, Medicaid, Medicaid managed care plans, etc., for payment for such services.</p>

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RES 202-I-22	Advocating for State GME Funding	Adopted.	In February 2023, our AMA published an updated Compendium of Graduate Medical Education Initiatives that contains relevant state-level information and recommendations for improving GME including states that have positive programs that could be emulated. It was recently shared at the 2023 AMA Medical Student Advocacy Conference and was included in the April edition of AMA Med Ed Update. AMA also shared the Compendium with our Federation partners and notified the states and specialties of our readiness to work with them on state GME-funding issues.
RES 203-I-22	International Medical Graduate Employment	Adopted as Amended.	AMA Policy Database has been updated.
RES 205-I-22	Waiver of Due Process Clauses	Adopted as Amended.	AMA Policy Database has been updated.
RES 206-I-22	Nursing Shortage	Adopted as Amended.	AMA's Medical Education group is developing a manuscript on this subject that will be submitted for peer-review.
RES 208-I-22	Comparing Student Debt, Earnings, Work Hours, and Career Satisfaction Metrics in Physicians v. Other Health Professionals	Alternate Resolution 208 Adopted in lieu of Resolution 208.	AMA Policy Database has been updated.
RES 210-I-22	Elimination of Seasonal Time Changes and Establishment of Permanent Standard Time	Adopted.	AMA Policy Database has been updated.
RES 211-I-22	Substance Use Harm Reduction	Adopted with Change in Title.	AMA Policy Database has been updated.
RES 213-I-22	Hazard Pay During a Disaster Emergency	AMA Policies D-130.970 and D-390.947 reaffirmed in lieu of Resolution 213.	AMA Policy Database has been updated.
RES 214-I-22	Universal Good Samaritan Statute	Referred.	A Board of Trustees Report on this subject will be prepared for consideration at the 2023 Interim Meeting. BOT Report 06-I-23 appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee B)

Report/Resolution	Title	House Action	Status
RES 215-I-22	Eliminating Practice Barriers for International Medical Graduates During Public Health Emergencies	Adopted as Amended with Change in Title.	<p>On April 6, 2023, our AMA sent a letter urging the Administration to allow temporary provisions for H-1B location condition applications (LCAs) to make worksite requirements more flexible for IMG physicians during public health emergencies. The letter further urged the Administration to support expedited licensing inclusions for IMG physicians in H-1B status during public health emergencies.</p> <p>A letter was sent to the leadership of Intealth to notify them of new AMA policy advocating to allow currently practicing physicians, including international medical graduates, with valid licenses in states and territories of the U.S. in the health professional shortage areas to have temporary access to all unique and expedited licensing options, both inside and outside of the state of their practice during public health emergencies, to facilitate workforce utilization at the time of critical shortage.</p> <p>The Council on Medical Education regularly engaged with the leadership of Intealth and addresses topics of interest and concern.</p>
RES 216-I-22	Expanding Parity Protections and Coverage of Mental Health and Substance Use Disorder Care	Adopted as Amended.	AMA Policy Database has been updated.

Report/Resolution	Title	House Action	Status
RES 219-I-22	Hold Accountable the Regulatory Bodies, Hospital Systems, Staffing Organizations, Medical Staff Groups, and Individual Physicians Supporting Systems of Care Promoting Direct Supervision of Emergency Departments by Nurse Practitioners	Referred for Decision.	<p>Resolution 219 was introduced by the Mississippi delegation called for our American Medical Association (AMA) to, “hold accountable regulatory bodies, hospital systems, staffing organizations, medical staff groups, and individual physicians supporting systems of care that promote direct supervision of emergency departments by nurse practitioners.” Testimony before the House of Delegates (HOD) agreed with the spirit of the resolution – specifically, that only physicians should provide direct supervision of the provision of emergency care in the emergency department. Concerns, however, were noted with the specific language of the resolution. The Reference Committee agreed with these stated concerns and offered an amended resolution that read, “[that] our American Medical Association advocate that physicians, ideally board-certified emergency physicians, are the only members of the health care team qualified to supervise the provision of emergency care services in the emergency department.” The HOD generally supported this language over the original resolution, however, debate continued over the board certification language and multiple amendments were offered to address the issues raised. Unable to come to an agreement, the HOD ultimately referred Resolution 219 to the Board of Trustees for decision. The Board considered a report from management on this issue and agreed with the assessment provided in that report.</p> <p>The Board VOTED that the following existing AMA policies be reaffirmed in lieu of Resolution 219:</p> <ul style="list-style-type: none"> •Policy H-160.949, “Practicing Medicine by Non-Physicians” •Policy H-160.950, “Guidelines for Integrated Practice of Physician and Nurse Practitioner” •Policy H-360.987, “Principles Guiding AMA Policy Regarding Supervision of Medical Care Delivered by Advanced Practice Nurses in Integrated Practice” •Policy H-35.989, “Physician Assistants” •Policy H-160.947, “Physician Assistants and Nurse Practitioners” •Policy D-35.982, “AMA Support for States in Their Development of Legislation to Support Physician-Led, Team Based Care” •Policy H-160.906, “Models / Guidelines for Medical Health Care Teams”
RES 222-I-22	Allocate Opioid Funds to Train More Addiction Treatment Physicians	Adopted.	AMA Policy Database has been updated.

Report/Resolution	Title	House Action	Status
RES 223-I-22	Opposition to Criminalization of and Civil Liability for Pregnancy Loss as the Result of Medically Necessary Care	Adopted as Amended with Change in Title.	A management report was considered by the Board of Trustees at its March 2023 meeting. The Board reaffirmed existing policy in lieu of Resolution 219 determining that existing policy addresses the intent of Resolution 219 that nurse practitioners and physician assistants shall not practice emergency care in an emergency department without appropriate physician supervision and that neither nurse practitioners nor physician assistants should supervise care in an emergency department. The Board determined that this existing policy on physician supervision of nurse practitioners and physician assistants is intentionally broad, capturing all types of care, such as primary care and specialty care, in all settings, such as emergency departments, urgent care centers, hospitals, physician offices, etc. The Board also determined that creating setting or specialty specific policy could lead to disjointed policies on scope of practice for different specialties or settings, or unforeseen gaps in policy as newly impacted specialties, settings, or practice scenarios arise.
RES 224-I-22	Fertility Preservation	AMA Policy H-185.990 Adopted as Amended in lieu of Resolution 224 and AMA Policies D-5.999 and H-9160.946 Reaffirmed.	AMA Policy Database has been updated.
RES 227-I-22	Access to Methotrexate and other Medications Based on Clinical Decisions	Adopted as Amended with Change in Title.	Our AMA joined with pharmacy groups (American Pharmacists Association, American Society of Health-System Pharmacists, and National Community Pharmacists Association) to call on policymakers to clarify legal obligations related to prescribing/dispensing medications that are indicated for abortion but may be prescribed for other reasons (i.e., methotrexate) and continues to work extensively with state medical associations across the country on strategies to ensure access to medically necessary care.
RES 228-I-22	Requirements for Physician Self-reporting of Outpatient Mental Health Services, Treatments or Medications to Credentialing Agencies and Insurers	Resolution 228 Adopted as Amended and AMA Policy H-295.858 Reaffirmed.	AMA Policy Database has been updated.
RES 229-I-22	Coverage and Reimbursement for Abortion Services	Alternate Resolution 229 Adopted in lieu of Resolutions 229 and 231.	AMA Policy Database has been updated.
RES 230-I-22	Increased Health Privacy on Mobile Apps in Light of Roe v. Wade	Adopted.	AMA Policy Database has been updated.

Report/Resolution	Title	House Action	Status
RES 231-I-22	Expanding Support for Access to Abortion Care	Alternate Resolution 229 Adopted in lieu of Resolutions 229 and 231.	See Resolution 229-I-22.
RES 232-I-22	Obtaining Professional Recognition for Medical Service Professionals	Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. BOT Report 07-I-23 appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee B)
RES 233-I-22	Urgent AMA Assistance to Puerto Rico and Florida and a Long-Range Project for Puerto Rico	Adopted as Amended.	Our AMA sent a letter dated December 2, 2022, to the chairs of the House and Senate Appropriations Committees urging them to provide all available federal disaster assistance to the Commonwealth of Puerto Rico and the State of Florida and noting that Puerto Rico needs both short-term funding and long-term solutions to help improve its health care infrastructure and Medicaid and Medicare financing. On May 2, 2023, our AMA sent a letter urging the Centers for Medicare & Medicaid Services (CMS) to work towards equitable reimbursement for physicians in Puerto Rico by using its section 1135 authority to implement temporary emergency regulatory funding waivers. In the longer term, the letter urged CMS to work with Congress to eliminate inequities in Medicaid funding to the U.S. territories and to increase Medicare payments to physicians in Puerto Rico to stop the outflow of physicians.
RES 302-I-22	Expanding Employee Leave to Include Miscarriage and Stillbirth	Amended Policy H-405.960 and H-420.979 Adopted in lieu of Resolutions 302, 303, and 308.	AMA Policy Database has been updated.
RES 303-I-22	Medical Student Leave Policy	Amended Policy H-405.960 and H-420.979 Adopted in lieu of Resolutions 302, 303, and 308.	AMA Policy Database has been updated.
RES 304-I-22	Protecting State Medical Licensing Boards from External Political Influence	Adopted.	Our AMA has worked and will continue to work with FSMB and our Federation partners to protect state medical boards from external influence and preserve their role in regulating the practice of medicine, including the board's authority to investigate and discipline physicians, where appropriate, for spreading misinformation/disinformation.
RES 305-I-22	Encouraging Medical Schools to Sponsor Pathway Programs to Medicine for Underrepresented Groups	Adopted as Amended.	AMA Policy Database has been updated.

Report/Resolution	Title	House Action	Status
RES 306-I-22	Increased Credit for Continuing Medical Education Preparation	Adopted as Amended.	<p>The AMA collaborated with the Accreditation Council for Continuing Medical Education to promote the credit change in the ACCME's January newsletter that was sent to all accredited CME providers as well as a targeted email sent to accredited CME providers that have offered credit for "learning from teaching".</p> <p>The credit change was also promoted on the AMA PRA Credit System webpage and included in the January edition of the MedEd Update e-newsletter.</p>
RES 307-I-22	Fair Compensation of Residents and Fellows	Policy H-310.912 and H-305.930 Reaffirmed in lieu of Resolution 307.	AMA Policy Database has been updated.
RES 308-I-22	Paid Family/Medical Leave in Medicine	Amended Policy H-405.960 and H-420.979 Adopted in lieu of Resolutions 302, 303, and 308.	AMA Policy Database has been updated.
RES 309-I-22	Bereavement Leave for Medical Students and Physicians	Adopted as Amended.	<p>In response to clauses 1 and 3:</p> <p>Letters were sent to the leadership of the Accreditation Council for Graduate Medical Education, Association of American Medical Colleges, and American Board of Medical Specialties to notify them of new AMA policy urging medical schools, residency and fellowship training programs, medical specialty boards, the Accreditation Council for Graduate Medical Education, and medical group practices to incorporate and/or encourage development of compassionate leave policies as part of the physician's standard benefit agreement; and encouraging medical schools, residency and fellowship programs, specialty boards, specialty societies and medical group practices to incorporate into their compassionate leave policies a three-day minimum leave, with the understanding that no medical student or physician should be required to take a minimum leave. New policy information was included in an AMA update to the ACGME Board of Directors and Review Committees.</p> <p>The Council on Medical Education is preparing a report for the Interim 2023 Meeting, currently titled "Leave Policies for Medical Students and Physicians", which will address clauses 2 and 5 (in conjunction with Resolutions 302, 303, and 308 regarding leave policies).</p> <p>Council on Medical Education Report 01 on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee C)</p>
RES 310-I-22	Enforce AMA Principles on Continuing Board Certification	Adopted as Amended.	<p>The Council on Medical Education is preparing an informational report for the Interim 2023 Meeting, currently titled "Update on Continuing Board Certification".</p> <p>Council on Medical Education Report 02 on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee C)</p>

Report/Resolution	Title	House Action	Status
RES 311-I-22	Support Hybrid Interview Techniques for Entry to Graduate Medical Education	Alternate Resolution 311 Adopted in lieu of Resolution 311.	<p>The Council on Medical Education is preparing a report for the Interim 2023 Meeting, currently titled "Hybrid interview techniques for entry to undergraduate and graduate medical education".</p> <p>Council on Medical Education Report 03 on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee C)</p>
RES 312-I-22	Reporting of Residency Demographic Data	Adopted as Amended.	<p>Letters were sent to the leadership of the Association of Graduate Medical Education and the Organization of Program Director Associations to notify them of new AMA policy encouraging that residency programs annually publish and share with FREIDA and other appropriate stakeholders, self-identified and other demographic data, including but not limited to the composition of their program over the last 5 years by age, historically marginalized, minoritized, or excluded status, sexual orientation and gender identity; and encouraging the Accreditation Council for Graduate Medical Education and other relevant stakeholders to annually collect data on childbirth and parenthood from all accredited US residency programs and publish this data with disaggregation by gender identity and specialty.</p> <p>A new question has been added to the National Program Survey asking for a link to an institution's leave policies; if provided, the link will be added to the program's listing on FREIDA. Also, FREIDA already asks for and displays the number of paid and unpaid family/medical leave days. This topic is addressed by AGCME Core Institutional Requirement IV.B.3.a).(2).</p>
RES 313-I-22	Request a Two-year Delay in ACCME Changes to State Medical Society Recognition Program	Adopted as Amended.	Continue current efforts with the State Medical Societies as liaison between AMA and the Accreditation Council for Continuing Medical Education (ACCME). The ACCME suspended its requirement for states to form collaborations at this time and will re-evaluate within two years, while increasing audits and support to the states. The AMA will continue to monitor this situation and engage with the ACCME and the state medical societies.
RES 316-I-22	Recognizing Specialty Certifications for Physicians	Adopted as Amended. 2nd Resolve Referred.	<p>A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting.</p> <p>Council on Medical Education Report 04 on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee C)</p>
RES 317-I-22	Support for GME Training in Reproductive Services	Adopted as Amended.	AMA Policy Database has been updated.
RES 602-I-22	Finding Cities for Future AMA Conventions/Meetings	Referred.	<p>A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting.</p> <p>BOT Report 12-I-23 appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee F)</p>

Report/Resolution	Title	House Action	Status
RES 607-I-22	Accountability for Election Rules Violations	Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2024 Annual Meeting.
RES 609-I-22	AMA Declares its Support for Turkish Physicians Imprisoned in Turkey in Violation of their Human and Professional Rights	Referred for Decision.	<p>At the 2022 Interim Meeting of the House of Delegates, Resolution 609, sponsored by the American Association of Public Health Physicians, was referred for decision. Resolution 609 asked the AMA (1) to reaffirm Resolution H-65.991, “Persecution of Physicians for Political Reasons and Participation by Doctors in Violations of Human Rights” and H-65.994, “Medical Care in Countries in Turmoil; (2) that the AMA Delegation to the World Medical Association (WMA) offer assistance to the WMA with efforts to free unjustly imprisoned health professionals and to preserve the independence of the Turkish Medical Association, and (3) that the President of the AMA write to the U.S. Secretary of State to express AMA’s concerns and to ask the Secretary to intervene in support of these Turkish health professionals and the independence of the Turkish Medical Association.</p> <p>The House of Delegates supported the Board of Trustees’ recommendation for referral for decision so that the support of our Turkish colleagues and the Turkish Medical Association could be expedited and amplified by the AMA Delegation to the WMA.</p> <p>The Board VOTED to that due to the urgent circumstances, Resolution 609-I-22 had been implemented based on a recommendation from the AMA’s World Medical Association delegation and with concurrence of the Board Chair. The Board VOTED that Resolution 609-I-22 be adopted.</p>
RES 801-I-22	Parity in Military Reproductive Health Insurance Coverage for All Service Members and Veterans	Adopted as Amended.	AMA Policy Database has been updated.
RES 802-I-22	Independent Databases of Allowed Amounts and Charges	Adopted as Amended.	Our AMA notified its Federation partners of its readiness to work with interested states and/or specialties to advocate for independent non-conflicted databases of allowed amounts and charges to ensure the continued identification of provider type and the frequency by which particular CPT codes are used and to advocate that independent databases of allowed amounts and charges be transparent on the source of their data, and must validate the data that they directly receive from payors for accuracy against what is actually paid to health care clinicians.

Report/Resolution	Title	House Action	Status
RES 804-I-22	Centers for Medicare & Medicaid Innovation Projects	Referred for Decision.	<p>Resolution 804-I-22 asked that our AMA advocate against mandatory participation in Center for Medicare and Medicaid Innovation (CMMI) demonstration projects, and advocate for CMMI instead to focus on the development of voluntary pilot projects. The Resolution also asks our AMA to advocate to ensure that any CMMI project that requires physician and/or patient participation be required to be approved by Congress.</p> <p>The Board considered a report from management and VOTED that Policies D-385.950, “CMMI Payment Reform Models” and H-330.894, “Demonstration Project Regarding Medicare Part D” be reaffirmed in lieu of Resolution 804-I-22.</p>
RES 805-I-22	COVID Vaccine Administration Fee	Adopted.	AMA Policy Database has been updated.
RES 806-I-22	Healthcare Marketplace Plan Selection	Alternate Resolution 806 Adopted in lieu of Resolution 806.	<p>Council on Medical Services Report 6 on this subject will appear in the Delegates Handbook for the 2023 Annual Meeting. (Informational)</p> <p>HOD Action: Filed.</p>
RES 808-I-22	Reinstatement of Consultation Codes	Policy D-385.955 Reaffirmed in lieu of Resolution 808.	AMA Policy Database has been updated.
RES 809-I-22	Uniformity and Enforcement of Medicare Advantage Plans and Regulations	Adopted as Amended.	<p>Our AMA has repeatedly raised the issue of lack of adequacy of MA provider networks in our meetings and comment letters to CMS. In our recent comments in response on Contract Year 2024 Changes to the MA Program, the AMA reiterated the importance of MA plans ensuring that all covered services are available and accessible to patients through their provider networks; that if patients need services that are not available within the plan’s network, CMS requires plans to arrange for patients to get the services outside of the plan’s network at in-network cost-sharing; our support for proposals that would codify certain requirements in regulation, including the requirement for in-network cost-sharing and for access to “appropriate providers, including credentialed specialists;” urged CMS to monitor the use of alternative arrangements to ensure that MA plans are consistently providing access to in-network care. In separate comments, the AMA urged CMS to improve accuracy and reduce the burden on physicians who submit data to multiple directories. We advocated that health plans should maintain accurate provider directories, simplify the process to determine whether a plan accurately identifies physicians as in or out-of-network, and that CMS should expressly prohibit unnecessary physician information requests by health plans.</p>
RES 810-I-22	Medicare Drug Pricing and Pharmacy Costs	Policies D-330.954, H-110.987, D-110.994, H-125.978 and H-105.988 Reaffirmed in lieu of Resolution 810.	AMA Policy Database has been updated.

Report/Resolution	Title	House Action	Status
RES 811-I-22	Covering Vaccinations through Medicare	Adopted as Amended with Change in Title.	For Medicare beneficiaries, preventive vaccines are covered through a combination of Medicare Part B and Part D, depending on the vaccine. Medicare Part B vaccine coverage includes vaccines to prevent influenza, pneumococcal disease, hepatitis B for beneficiaries who are at medium or high risk, COVID-19, and certain reasonable and necessary vaccines to treat an injury or exposure to a disease. Vaccines for these conditions do not have any cost-sharing requirements. All other commercially available vaccines that are determined to be reasonable and necessary and are not already covered by Part B are covered under Medicare Part D. According to updated CMS guidance from Dec. 2022, starting in 2023, patients with Medicare drug plans will pay nothing out-of-pocket for adult vaccines recommended by the Advisory Committee on Immunization Practices (ACIP), whether the vaccines are in Part B or Part D. Section 11401 of the Inflation Reduction Act of 2022 requires these vaccines to be free to patients and makes Part D vaccine cost-sharing consistent with coverage under Part B where the patient has no coinsurance or deductible. The guidance includes detailed instructions for how patients can access and how physicians can get payment for Part D vaccines and vaccine administration under various scenarios. Drugs covered under Medicare Part D do not affect budget neutrality under Part B.
RES 812-I-22	Coverage for Implant Associated Malignancies	Adopted as Amended with Change in Title.	AMA Policy Database has been updated.
RES 813-I-22	Amending Policy on a Public Option to Maximize AMA Advocacy	Alternate Resolution 813 Adopted in lieu of Resolution 813.	AMA Policy Database has been updated.
RES 814-I-22	National Coverage Determination Coronary Artery Calcium Scoring	Alternate Resolution 814 Adopted in lieu of Resolution 814.	Since the USPSTF last reviewed CAC scoring in 2018 and concluded that the evidence at the time was insufficient to assess the balance of benefits and harms of CAC scoring to traditional risk assessment for cardiovascular disease (CVD) in asymptomatic adults to prevent CD events, there is a new body of evidence to suggest that CAC scores are cost-effective, noninvasive, low-radiation, and effective at signifying a patient's risk stratification for CVD, particularly for those with heightened risk factors, and can allow physicians to tailor more effective preventive therapies. The American College of Cardiology/American Heart Association released updated guidelines in November 2018 based on updated evidence, and a report was published to the Journal of the ACC in November 2021. Without a graded recommendation from the USPSTF, the Medicare program may not have the authority to adopt a National Coverage Determination for this service. Accordingly, our AMA is communicating to the USPSTF around prioritization of this topic for an evidence review given the amount of time that has passed since the last review and the new evidence that is available and will subsequently use any updated favorable review as a basis for urging future Medicare coverage of this service.

Report/Resolution	Title	House Action	Status
RES 816-I-22	Coverage for Continuous or Flash Glucose Monitoring Devices	Adopted as Amended with Change in Title.	Medicare does cover continuous glucose monitors (CGMs). Beginning July 18, 2021, Medicare permanently eliminated the requirement for a four-time-daily fingerstick for patients with diabetes who are insured by Medicare to qualify for coverage of a CGM. On February 28, 2022, Medicare determined that both non-adjunctive and adjunctive CGMs may be classified as durable medical equipment (DME). CGM devices that solely display results on a smartphone and do not have a stand-alone receiver or integration into an insulin infusion pump do not meet the definition of DME and are not covered because, to meet the definition of DME for Medicare, devices must be primarily medical in nature and not be useful in the absence of illness.
RES 817-I-22	Promoting Oral Anticancer Drug Parity	Alternate Resolution 817 Adopted in lieu of Resolution 817.	In February of 2023, our AMA reviewed previous legislation from the 117th Congress (S 3080/HR 4385) that is aligned with the intent of this directive. Upon further discussion with the Senate Sponsor's office, it was indicated to staff that this bill will be re-introduced this year. The text is currently still being worked on so there was no definitive timeline given at the time of the discussion. Staff subsequently presented this information to the Council on Legislation and requested a vote of support to advocate for this future bill, should the final language be in line with AMA policy. The Council on Legislation affirmed this action. We anticipate there may be updated language for review later this year.
RES 818-I-22	Addressing Adult and Pediatric Obesity D-440.954	Alternate Resolution 818 Adopted in lieu of Resolution 818.	Our AMA notified its Federation partners of its readiness to work with any interested states and/or specialties in increasing public insurance coverage of and payment for the full spectrum of evidence-based adult and pediatric obesity treatment
RES 819-I-22	Advocating for the Implementation of Updated U.S. Preventive Services Task Force Recommendations for Colorectal Cancer Screening Among Primary Care Physicians and Major Payors by the AMA	Alternate Resolution 819 Adopted in lieu of Resolution 819.	AMA Policy Database has been updated.
RES 820-I-22	Third-Party Pharmacy Benefit Administrators	Adopted.	Our AMA notified its Federation partners of its readiness to work with interested states and/or specialties to advocate that third-party pharmacy benefit administrators be included in future PBM oversight efforts at the state and federal levels. The AMA is also in the process of advocating to state regulators at NAIC on the importance of PBM regulation, including those PBMs handling specialty drugs.

Report/Resolution	Title	House Action	Status
RES 821-I-22	PREP is an Essential Health Benefit	Adopted as Amended.	To date, the AMA has filed four amicus briefs in the Braidwood Management v. Becerra litigation. The briefs have been filed in both the federal district court and court of appeals in support of the federal government's efforts to reverse the judgment below and stay any changes to preventive care coverage while the case proceeds. The AMA will continue to be actively involved in the litigation and assess whether any future briefs might be helpful to the courts.
RES 822-I-22	Monitoring of Alternative Payment Models within Traditional Medicare	Referred.	A Council on Medical Services Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. Council on Medical Services Report 01 on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee J)
RES 823-I-22	Health Insurers and Collection of Co-pays and Deductibles	Referred.	A Council on Medical Services Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. Council on Medical Services Report 02 on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee J)
RES 824-I-22	Enabling and Enhancing the Delivery of Continuity of Care When Physicians Deliver Care Across Diverse Problem Sets	Referred.	A Council on Medical Services Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. Council on Medical Services Report on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee J)
RES 826-I-22	Leveling the Playing Field	Adopted as Amended.	An AMA analysis was completed in response to the resolution which illustrates why estimating excess spending from site of service differentials is difficult.
RES 901-I-22	Opposing the Use of Vulnerable Incarcerated People in Response to Public Health Emergencies	Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. BOT Report 02-I-23 appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee K)
RES 902-I-22	Reducing the Burden of Incarceration on Public Health	Adopted as Amended.	Our AMA notified its Federation partners of its readiness to work with interested state and/or specialty societies in partnering with public health organizations and other interested stakeholders to urge state officials and agencies to minimize the negative health effects of incarceration by supporting programs that facilitate employment at a living wage, and safe, affordable housing opportunities for formerly incarcerated individuals, as well as research into alternatives to incarceration.
RES 904-I-22	Immigration Status Is a Public Health Issue	Adopted.	

Report/Resolution	Title	House Action	Status
RES 905-I-22	Minimal Age of Juvenile Justice Jurisdiction in the United States	Adopted as Amended.	Our AMA is drafting model legislation establishing a minimal age of 14 for juvenile justice jurisdiction in the United States. AMA model legislation establishing a minimum age of 14 for juvenile justice jurisdiction has been drafted and approved by the COL at its April 2023 meeting.
RES 906-I-22	Requirement for COVID-19 Vaccination in Public Schools Once Fully FDA-Authorized	Policy H-440.808 Adopted as Amended in lieu of Resolution 906.	AMA Policy Database has been updated.
RES 907-I-22	A National Strategy for Collaborative Engagement, Study, and Solutions to Reduce the Role of Illegally Possessed Firearms in Firearm Related Injury	Adopted as Amended with Change in Title.	
RES 908-I-22	Older Adults and the 988 Suicide and Crisis Lifeline	Policy D-345.974 Adopted as Amended in lieu of Resolution 908.	AMA Policy Database has been updated. Our AMA continues to provide resources, including the already created model state legislation drafted by the National Association of State Mental Health Program Directors, and support to Federation partners and work with appropriate external stakeholders to ensure adequate funding for 988.
RES 909-I-22	Decreasing Firearm Violence and Suicide in Seniors and other High-Risk Populations	Adopted as Amended with Change in Title.	Our AMA notified its Federation partners regarding its readiness to work with any interested state and/or specialty societies on advocating for adequate state funding for the 988 system. Our Advocacy Resource Center is providing assistance to the Minnesota Medical Association and Minnesota Firearm Safety and Suicide Prevention Coalition.
RES 910-I-22	Gonad Shields: Regulatory and Legislation Advocacy to Oppose Routine Use	Adopted as Amended.	On April 11, 2023, our AMA sent a letter to the U.S. Food and Drug Administration informing the agency of our recommendation to oppose the use of gonad shields in medical imaging, as well as calling for an amendment to the Code of Federal Regulations to oppose their mandatory routine use. The letter emphasized the recent evidence that promotes the shift away from routine use that has been endorsed by leading specialty societies and organizations, including National Council on Radiation Protection and Measurements and the American College of Radiology.

Report/Resolution	Title	House Action	Status
RES 911-I-22	Critical Need for National Emergency Cardiac Care (ECC) System to Ensure Individualized, State-Wide, Care for ST Segment Elevation Myocardial Infarction (STEMI), Cardiogenic Shock (CS) and Out-of-Hospital Cardiac Arrest (OHCA),	Alternate Resolution 911 Adopted in lieu of Resolution 911.	AMA Policy Database has been updated.
RES 912-I-22	Reevaluating the Food and Drug Administration's Citizen Petition Process	Alternate Resolution 912 Adopted in lieu of Resolution 912.	
RES 913-I-22	Supporting and Funding Sobering Centers	Referred.	A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. Council on Science and Public Health Report on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee K)
RES 915-I-22	Pulse Oximetry in Patients with Pigmented Skin	Adopted as Amended.	
RES 916-I-22	HPV-Associated Cancer Prevention	Adopted as Amended with Change in Title.	

Report/Resolution	Title	House Action	Status
RES 917-I-22	Care for Children with Obesity	Referred for Decision.	<p>Resolution 917, sponsored by the Society of American Gastrointestinal and Endoscopic Surgeons, and referred for decision by the HOD asked the AMA to support education for physicians on treatment options and improve access to treatment for children with obesity. Specifically, the resolution calls on the AMA to: 1) support the education of physicians on the morbidity of childhood obesity, the existence of effective treatment for this condition, and the importance of patients obtaining bariatric care as early as possible; 2) support the development of multidisciplinary care programs for children with obesity, inclusive of bariatric surgery care, access to medications, nutrition, and mental health support; and 3) actively work to remove barriers to bariatric surgery, access to medications, nutrition, and mental health support for the treatment of children with obesity.</p> <p>The Board considered a report from management that provided an overview of AMA's existing policies that address children with obesity, the testimony provided at Interim 2023, and a discussion on the resolves put forth in the resolution. The Board VOTED that in lieu of Resolution 917-I-22:</p> <ul style="list-style-type: none"> • AMA policy H-440.902, Obesity as a Major Health Concern be reaffirmed. • AMA policy D-440.954, Addressing Adults and Pediatric Obesity, be amended to include Resolve #2 from Resolution 917: <ul style="list-style-type: none"> o That our AMA supports the development of multidisciplinary care programs for children with obesity inclusive of bariatric surgery care, access to medications, nutrition, and mental health support. • AMA policy D-440.954, Addressing Adults and Pediatric Obesity, be amended to include: <ul style="list-style-type: none"> o That our AMA supports further research on the long-term impact of surgical interventions on children with obesity.
RES 918-I-22	Opposition to Alcohol Industry Marketing Self-Regulation	Adopted.	AMA Policy Database has been updated.
RES 919-I-22	Decreasing Youth Access to E-cigarettes	Referred.	<p>A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting.</p> <p>Council on Science and Public Health Report on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee K)</p>
RES 921-I-22	Firearm Injury and Death Research and Prevention	Adopted as Amended.	Our AMA continues to work with members of the Federation to increase funding for research and prevention on firearm injury and death, and with other interested stakeholders and experts in the field of firearm injury/death prevention and research to ensure the quality of and distribution of such research.

Report/Resolution	Title	House Action	Status
RES 923-I-22	Physician Education and Intervention to Improve Patient Firearm Safety	Adopted as Amended, Resolve 3 Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. BOT Report 14-I-23 appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee K)
RES 924-I-22	Domestic Production of Personal Protective Equipment	Adopted as Amended.	AMA Policy Database has been updated.
RES 926-I-22	Limit the Pornography Viewing by Minors Over the Internet	Adopted.	AMA Policy Database has been updated.
RES 928-I-22	Expanding Transplant Evaluation Criteria to Include Patients that May Not Satisfy Center-Specific Sobriety Requirements	Adopted as Amended with Change in Title.	AMA Policy Database has been updated.
RES 929-I-22	Opposing the Marketing of Pharmaceuticals to Parties Responsible for Captive Populations	Adopted as Amended.	AMA Policy Database has been updated.
RES 930-I-22	Addressing Longitudinal Health Care Needs of Children in Foster Care	Alternate Resolution 930 Adopted in lieu of Resolution 930.	AMA Policy Database has been updated.
RES 931-I-22	Amending H-160.903 Eradicating Homelessness to Include Support for Street Medicine Programs	Adopted as Amended.	AMA Policy Database has been updated.
RES 933-I-22	Reducing Disparities in HIV Incidence through Pre-Exposure Prophylaxis (PrEP) for HIV	Adopted as Amended.	AMA Policy Database has been updated.

Report/Resolution	Title	House Action	Status
RES 935-I-22	Government Manufacturing of Generic Drugs to Address Market Failures	Referred.	A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. Council on Science and Public Health Report on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee K)
RES 936-I-22	Promoting the Use of Multi-Use Devices and Sustainable Practices in the Operating Room	Resolution 936-I-22 Referred. Policy H-480.959 Reaffirmed.	AMA Policy Database has been updated.
RES 937-I-22	Indications for Metabolic and Bariatric Surgery	Referred.	A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Annual Meeting. (Reference Committee K) HOD Action: Recommendations in CSAPH Report 07, Adopted as Amended with Change in Title, Remainder of Report Filed.
RES 938-I-22	AMA Study of Efficacy of Requirements for Metal Detection/Weapons Interdiction Systems in Health Care Facilities	Referred.	A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2023 Interim Meeting. Council on Science and Public Health Report on this subject appears in the Delegates Handbook for the 2023 Interim Meeting. (Reference Committee K)
Speakers Report 01-I-22	Election Committee - Interim Report	Recommendations in Speakers Report 1-I-22 Adopted, Remainder of Report Filed.	