DISCLAIMER

The following is a preliminary report of actions taken by the House of Delegates at its 2023 Interim Meeting and should not be considered final. Only the Official Proceedings of the House of Delegates reflect official policy of the Association.

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES (I-23)

Report of Reference Committee	e	F
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Rebecca L. Johnson, MD, Chair

1 Your Reference Committee recommends the following consent calendar for acceptance: 2 3 RECOMMENDED FOR ADOPTION 4 5 Report of the House of Delegates Committee on the Compensation of the 1. 6 Officers 7 8 2. Council on Long Range Planning and Development Report 1 - Women 9 Physicians Section Five-Year Review 10 11 Board of Trustees Report 13 - House of Delegates (HOD) Modernization 3. 12 13 4. Speakers Report 2 - Extending Online Forum Trial Through A-24 14 15 5. Resolution 606 - Prevention of Healthcare-Related Scams 16 17 RECOMMENDED FOR REFERRAL 18 Board of Trustees Report 12 - American Medical Association Meeting Venues 19 6. 20 and Accessibility 21

Amendments

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

Resolution 601 - Carbon Pricing to Address Climate Change

RECOMMENDED FOR ADOPTION

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

RECOMMENDATION:

 Your Reference Committee recommends that the recommendation in the Report of the House of Delegates Committee on the Compensation of the Officers be <u>adopted</u> and the remainder of the Report be filed.

HOD ACTION: Recommendation in the Report of the House of Delegates Committee on the Compensation of the Officers <u>adopted</u> and the remainder of the Report <u>filed</u>.

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

That the President honorarium be increased by 3% and that the President-Elect, Immediate Past-President, Chair and Chair-Elect honoraria be increased by 2% effective July 1, 2024. These increases result in the following Honoraria:

POSITION	GOVERNANCE HONORARIUM
President	\$298,865
Immediate Past President	\$290,659
President-Elect	\$290,659
Chair	\$285,886
Chair-Elect	\$211,630

Beyond an introduction of the report by the Committee on Compensation of the Officers, your Reference Committee received no further testimony; therefore, your Reference Committee recommends adoption of the report.

(2) COUNCIL ON LONG RANGE PLANNING AND DEVELOPMENT REPORT 1 - WOMEN PHYSICIANS SECTION FIVE-YEAR REVIEW

RECOMMENDATION:

Your Reference Committee recommends that the recommendation in Council on Long Range Planning and Development Report 1 be <u>adopted</u> and the remainder of the Report be <u>filed</u>.

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

through 2028 with the next review no later than the 2028 Interim Meeting and that the remainder of this report be filed. (Directive to Take Action)

There was only supportive testimony of this item, which included comments encouraging the Council on Long Range Planning and Development (CLRPD) to consider amending

our AMA Bylaws to provide for permanent section status after two successful five-year

reviews of a delineated section. This concept garnered opposition that cited the benefits

of having Sections continue to reflect on their structure, objectives, and accomplishments

The Council on Long Range Planning and Development recommends that our American

Medical Association renew delineated section status for the Women Physicians Section

Based on the CLRPD's positive review and the favorable testimony regarding the benefits of our AMA having a Women Physicians Section, your Reference Committee recommends adoption of the report.

(3) BOARD OF TRUSTEES REPORT 13 - HOUSE OF DELEGATES (HOD) MODERNIZATION

RECOMMENDATION:

with a regular cadence.

Your Reference Committee recommends that the recommendation in Board of Trustees Report 13 be <u>adopted</u> and the remainder of the Report be <u>filed</u>.

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

In light of these considerations, your Board of Trustees recommends that:

1. Resolution 622-A-22 not be adopted.

2. Board of Trustees Report 20-A-23 be reaffirmed.

 Board of Trustees Report 13 responds to referral of Resolution 622-A-22, HOD Modernization, which called on the AMA to convene a task force to determine how future House of Delegates (HOD) meetings may be updated to improve efficiency and effectiveness.

The Board of Trustees noted that there are ongoing task forces and planned activities to advance the modernization of the HOD, including:

 The Resolution Modernization Task Force Open Forum that is being hosted during the 2023 Interim Meeting; 5 6 7

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• Speakers Report 2 - Extending Online Forum Trial Through A-24 calls for an extension of the Online Forum trial that began at the 2022 Annual Meeting. The outcome of the trial, and the success of subsequent adjustments that have been made, have yet to be determined; and

 Board of Trustees Report 20-A-23, Surveillance Management System for Organized Medicine Policies and Reports, reflects the AMA's commitment to invest in technology and other infrastructure changes to support tracking of HOD business.

Beyond the statement from the Board of Trustees, there was no testimony on this report: therefore, your Reference Committee recommends that Board of Trustees Report 13 be adopted.

SPEAKERS REPORT 2 - EXTENDING ONLINE FORUM (4) TRIAL THROUGH A-24

RECOMMENDATION:

Your Reference Committee recommends that the recommendation in Speakers Report 2 be adopted and the remainder of the Report be filed.

HOD ACTION: Recommendation in Speakers Report 2 adopted and the remainder of the Report filed.

That the trial established by Policy D-600.956 be continued through Annual 2024.

Speakers Report 2 calls for a continuation of the Online Forum trial through the 2024 Annual Meeting. The trial was established by Policy D-600.956, "Increasing the Effectiveness of Online Reference Committee Testimony."

Testimony was limited. The Chair of Resolution Modernization Task Force noted that the Online Forums were currently under discussion as a part of their work. A suggestion was offered in response that educational opportunities for resolution writing be made available.

Your Reference Committee noted that Online Forum testimony was generally supportive of extending the trial; therefore, your Reference Committee favors adoption of Speakers Report 2.

1 RESOLUTION 606 - PREVENTION OF HEALTHCARE-(5) 2 RELATED SCAMS 3 4 **RECOMMENDATION:** 5 6 Your Reference Committee recommends that 7 Resolution 606 be adopted. 8 9 **HOD ACTION: Resolution 606 adopted.**

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RESOLVED, that our American Medical Association encourage relevant parties to educate patients and physicians on healthcare-related scams, including how to avoid and report them. (New HOD Policy)

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The author of Resolution 606 noted that healthcare related fraud has increased in recent years. Although individuals from various backgrounds have been affected, it was noted that the elderly population has been particularly vulnerable to fraudulent healthcare-related events. Testimony also highlighted that marginalized and minoritized populations were disproportionately impacted due to factors such as language barriers.

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Your Reference Committees noted that Online Forum testimony supported patient and physician education on recognizing and avoiding healthcare related scams.

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Therefore, your Reference Committee recommends that Resolution 606, Prevention of Healthcare-Related Scams, be adopted.

RECOMMENDED FOR REFERRAL

(6) BOARD OF TRUSTEES REPORT 12 - AMERICAN MEDICAL ASSOCIATION MEETING VENUES AND ACCESSIBILITY

RECOMMENDATION:

Your Reference Committee recommends that the recommendation in Board of Trustees Report 12 be referred with report back at the 2024 Annual Meeting.

HOD ACTION: Recommendation in Board of Trustees Report 12 <u>referred with report back at the 2024 Annual Meeting.</u>

The Board of Trustees therefore recommends that Policy G-630.140, "Lodging, Meeting Venues, and Social Functions," be amended by addition and deletion as follows in lieu of Resolution 610-A-22, Resolve 2, and Resolution 602-I-22, and the remainder of this report be filed:

AMA policy on lodging and accommodations includes the following:

- 1. Our AMA supports choosing hotels for its meetings, conferences, and conventions based on size, service, location, cost, and similar factors.
- Our AMA shall attempt, when allocating meeting space, to locate the Section Assembly Meetings in the House of Delegates Meeting hotel or in a hotel in close proximity.
- 3. All meetings and conferences organized and/or primarily sponsored by our AMA will be held in a town, city, county, or state that has enacted comprehensive regulation or legislation requiring smoke-free worksites and public places (including restaurants and bars), unless intended or existing contracts or special circumstances justify an exception to this policy, and our AMA encourages state and local medical societies, national medical specialty societies, and other health organizations to adopt a similar policy.
- 4. It is the policy of our AMA not to hold meetings and/or primarily sponsored by our AMA, in cities, counties, or states, or pay member officer or employee dues in any club, restaurant, or other institution that has exclusionary policies, including, but not limited to, policies based on, race, color, religion, national origin, ethnic origin, language, creed, sex, sexual orientation, gender, gender identity and gender expression, disability, or age unless intended or existing contracts or special circumstances justify an exception to this policy.
- Our AMA will not hold meetings organized by or primarily sponsored by our AMA at venues that have exclusionary policies, including, but not limited to, policies based on, race, color, religion, national origin, ethnic origin, language, creed, sex, sexual

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orientation, gender, gender identity and gender expression, disability, or age unless intended or existing contracts or special circumstances justify an exception to this policy.

- 6. Our AMA staff will work with facilities where AMA meetings are held to designate an area for breastfeeding and breast pumping.
- 7. All future AMA meetings will be structured to provide accommodations for members and invited attendees who are able to physically attend, but who need assistance in order to meaningfully participate.
- 8. Our AMA will revisit our criteria for selection of hotels and other venues in order to facilitate maximum participation by members and invited attendees with disabilities.
- 9. Our AMA will utilize security experts to assess the safety risk for our attendees and guests at all venues. (Modify Current HOD Policy)

Board of Trustees Report 12 outlines issues with our AMA's current venue policies that have presented challenges in accommodating House of Delegates meetings. The report indicates that few venues currently meet AMA's policy requirements and can handle the size of an AMA meeting without requiring multiple hotels and a convention center. The Board of Trustees recommend amending AMA policy to allow for the selection of venues that comport with AMA policy independent of local and state legislation or policies.

The response to the report was mixed as the matter is complex. The majority of the testimony was in opposition and many supported referral. Most testimony was heard regarding Recommendations 4, 5, and 9.

Supportive testimony recognized the difficulty given the restrictions current policy places upon choice of meeting venues. There was also concern raised that boycotting a locale may not be an effective way to advocate for change.

Opposition to the report noted concerns, including but not limited to, personal safety and professional legal protections for provision of medical care. An amendment was proffered, which reads:

It is the policy of our AMA to not hold meetings in cities, counties, or states that have laws in which 1) physicians travelling from other states could be placed atrisk of prosecution for providing evidence-based medical care; or 2) access to the full spectrum of urgent evidence-based medical care for AMA meeting attendees is restricted.

Your Reference Committee believes the additional language would address some of the concerns expressed by those who are opposed to changing current AMA policy, but the language is neither fully inclusive of minority or LGBTQ communities, nor does the language fully resolve the conundrum our Board of Trustees have outlined.

Your Reference Committee believes that referral of Board of Trustees Report 12 with a report back at the 2024 Annual Meeting would give our AMA an opportunity to address concerns that were raised in the testimony.

(7) 2 CLIMATE CHANGE 3 4 **RECOMMENDATION:** 5 6 Reference Committee recommends that 7 Resolution 601 be referred. 8 9 **HOD ACTION: Resolution 601 referred.** 10 11 RESOLVED, that our American Medical Association amend D-135.966 by addition and 12 deletion to read as follows: 13 14 Declaring Climate Change a Public Health Crisis D-135.966 15 16 Our AMA: 17 18 1. Our AMA declares climate change a public health crisis that threatens the health and 19 well-being of all individuals. 20 21 2. Our AMA will protect patients by advocating for policies that: (a) limit global warming 22 to no more than 1.5 degrees Celsius, (b) reduce US greenhouse gas emissions 23 aimed at a 50 percent reduction in emissions by 2030 and carbon neutrality by 2050, 24 and (c) support rapid implementation and incentivization of clean energy solutions 25 and significant investments in climate resilience through a climate justice lens. 26 27 3. Our AMA will consider signing on to the Department of Health and Human Services 28 Health Care Pledge or making a similar commitment to lower its own greenhouse 29 gas emissions. 30 31 4. Our AMA encourages the health sector to lead by example in committing to carbon 32 neutrality by 2050. 33 34 5. Our AMA will develop a strategic plan for how we will enact our climate change 35 policies including advocacy priorities and strategies to decarbonize physician 36 practices and the health sector with report back to the House of Delegates at the 37 2023 Annual Meeting. 38 39 6. Our AMA will advocate for federal and state carbon pricing systems and for US 40 support of international carbon pricing. 41 42 Our AMA will work with the World Medical Association and interested countries' medical associations on international carbon pricing and other ways to address 43

RESOLUTION 601 - CARBON PRICING TO ADDRESS

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As was stated in Reference Committee F's Preliminary Document, testimony was mixed regarding AMA's role in addressing climate change by advocating for carbon pricing.

climate change. (Modify Current HOD Policy)

Those in support proffered that the United States healthcare sector is responsible for 8.5 percent of the country's greenhouse emissions, which is why our AMA already has policy declaring climate change to be a public health crisis. It is believed that advocating for carbon pricing would set the stage for AMA advocacy in this area and would serve to protect patients worldwide. Those opposed proffered that carbon pricing increases costs for those who can least afford it, and our AMA does not have the expertise to advise or contribute effectively to national or global policy on environmental legislation. There are many climate institutions that are much more experienced in helping to direct effective policy. Given the cogent but divided testimony that emerged in the Online Forum and that continued during the on-site hearing, your Reference Committee recognizes this to be a complex issue. Your Reference Committee therefore recommends referral of Resolution 601 so our House of Delegates can be fully informed, by way of a report back, on the benefits and pitfalls of carbon pricing, including the possible consequences of our AMA endorsing a specific climate-saving alternative. This concludes the report of Reference Committee F. I would like to thank Brooks F. Bock, MD, Robyn F. Chatman, MD, MPH, Robert A. Gilchick, MD, MPH, Richard F. Labasky, MD, MBA, Brandi N. Ring, MD, MBA, Michael B. Simon, MD, MBA, and all those who testified before the Committee.

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