

AMA INTERIM MEETING REPORT

The AMA interim meeting was held in Orlando Florida from November 12-15, 2016. The following report outlines just some of the items discussed and acted on. For a full list of the reports and resolutions considered, as well as the videos of the speeches, go to www.ama-assn.org.

ADVOCACY FOR PATIENTS

Resolution 5 – NO COMPROMISE ON ANTI-FEMALE GENITAL MUTILATION POLICY addresses the issue of female genital mutilation (FGM) and recent attempts by some academics and physicians to redefine FGM and take a compromised position on its practice. The resolution asks that our AMA do the following: 1) reaffirm its policy against FGM, 2) further clarify its current position on FGM to explicitly state that our AMA condemns any and all ritual procedures including, but not limited to, ‘nicking’ or ‘genital alteration’ procedures done to the genitals of women and girls, 3) actively advocate against the practice of FGM in all its forms and effectively add the voice of America’s physicians to the voices of many anti-FGM human rights activists and their organizations which advocate for the survivors and victims, 4) partner in the public advocacy with reputable anti-FGM activists and survivors, and 5) educate its membership and the American public about the harm of FGM prominently through its website and provide resources about the ethics and medical harm of any and all forms of FGM. This item was referred to the Board of Trustees.

Resolution 908 – FAITH AND MENTAL HEALTH asks that our AMA 1. advocate and support mental health and faith community partnerships that will provide a platform for faith leaders to get educated about psychiatric and substance abuse disorders and mental health providers understand the role of faith in recovery; and 2. study and support a partnership to foster respectful, collaborative relationships between psychiatrists, other mental health providers and the faith-based community to improve quality care for individuals and families with mental health and substance abuse problems.

Resolution 914 - NEEDLE/SYRINGE DISPOSAL asks that our AMA 1. support the requirement that medical facility needle/syringe disposal devices be as theft-proof and tamper-proof as possible; this requirement could be established by rule or statute; 2. support the requirement that stored used needles/syringes be properly secured so as to discourage theft; 3. support the requirement that theft and tamper-proof containers be placed in public restrooms for the purpose of needle/syringe disposal; an ideal device would crush the syringe as part of the disposal process; and 4. encourage those communities with a significant IV drug abuse population to establish a needle exchange program, since this helps eliminate the demand for used needles/syringes.

Resolution 917 – YOUTH INCARCERATION IN ADULT PRISONS asks that our AMA 1. oppose incarceration of children (individuals less than 18 years of age) in adult prisons for non-violent crimes; 2. work with appropriate organizations to address age cutoffs for children (individuals

less than 18 years of age) in adult prisons; 3. advocate for elimination of the incarceration of children (individuals less than 18 years of age) in adult prisons for non-violent crimes; 4. advocate for the passage of legislation that addresses reform for children (individuals less than 18 years of age) in adult prisons with respect to developing appropriate guidelines for parole, expungement and sealing of records, and solitary confinement; and 5. support early intervention and rehabilitation for children (individuals less than 18 years of age) that have been incarcerated in adult prisons.

There were several reports and resolution dealing with addiction issues.

There was a resolution asking that our AMA encourage relevant stakeholders to research the overall effects of opioid production cuts, and that the DEA be more transparent when developing medication production guidelines.

A resolution calling for mental health and faith community partnerships that foster improved education and understanding for faith leaders regarding culturally competent, medically accepted, and scientifically proven methods of care for psychiatric and substance use disorders.

ADVOCACY FOR PHYSICIANS

Deferred Action for Childhood Arrivals (DACA) is an American immigration policy passed by President Obama as an executive action that allows certain undocumented immigrants to the United States who entered the country before their 16th birthday and before June 2007 to receive a renewable two-year work permit and exemption from deportation. Given the outcome of the Presidential election, a late resolution was introduced.

Late resolution 1001 - Support for DACA-Eligible Healthcare Professionals was adopted. It reads:

RESOLVED, That our American Medical Association issue a statement in support of current US healthcare professionals, including those currently training as medical students or residents and fellows, who are Deferred Action for Childhood Arrivals recipients.

RESOLUTION 309 - DEVELOPMENT OF ALTERNATIVE COMPETENCY ASSESSMENT MODELS asks that our American Medical Association amend AMA Policy H-8 275.936, Mechanisms to Measure Physician Competency, to read as follows: Our AMA (1) works with the American College of Graduate Medical Education, American Board of Medical Specialties, and other relevant organizations to develop alternative and more accurate methods to determine ongoing clinical competency; (2) reviews and proposes improvements for assuring continued physician competence, including but not limited to performance indicators, board certification and recertification, professional experience, continuing medical education, and teaching experience; and (2)(3) opposes the development and/or use of "Medical Competency Examination" and establishment of oversight boards for current state medical boards as proposed in the fall 1998 Report on Professional Licensure of the Pew Health Professions Commission, as an additional measure of physician competency.

Resolution 310 - MAINTENANCE OF CERTIFICATION AND INSURANCE PLAN PARTICIPATION asks that our American Medical Association increase its efforts to work with the insurance industry to ensure that maintenance of certification does not become a requirement for insurance panel participation.

Maryland's Resolution 312 – ELIMINATING THE TAX LIABILITY FOR PAYMENT OF STUDENT LOANS

Resolution 312 asks that our American Medical Association work with the Internal Revenue Service to eliminate the tax liability when private employers provide the funds to repay student loans for physicians who agree to work in an underserved area.

The Reference Committee heard testimony in support of viable solutions to the growing and onerous debt burden on medical students—a burden that continues to increase. With medical students facing an average of more than \$170,000 in medical school debt, this item offers a win-win, by offering a financial carrot in exchange for vitally needed health care services in underserved areas—many of which cannot offer competitive salaries in comparison to the more remunerative geographic areas of the country. Two amendments were proffered: One, to remove the IRS, as that agency does not have jurisdiction over setting tax regulations (that is the purview of Congress); and two, to extend this to any loan forgiveness program—not just those at private institutions. The amended resolution was adopted.

LOCAL & FEDERAL LEGISLATION

BOARD OF TRUSTEES REPORT 3 - MODEL STATE LEGISLATION PROMOTING THE USE OF ELECTRONIC TOOLS TO MITIGATE RISK WITH PRESCRIPTION OPIOID PRESCRIBING recommends that our AMA support the ability of prescription drug monitoring programs (PDMPs) to have the capability for physicians to know when their patients have received a prescription for controlled substances from multiple prescribers or multiple pharmacies within a short time frame; and that our AMA advocate to key stakeholders, including the National Association of State Controlled Substances Authorities, the National Association of Boards of Pharmacy, and the National Governors Association, to ensure that efforts to reduce Multiple Provider Events (MPEs) are done in a manner that supports continuity of care; and that our AMA work with the Centers for Disease Control and Prevention (CDC), Substance Abuse and Mental Health Services Administration (SAMHSA) and other relevant federal agencies, to better understand the factors that lead to MPEs and develop medically and ethically appropriate strategies for reducing them; and that our AMA support the interoperability of state PDMPs with electronic health records (EHRs).

There were five resolutions dealing with the ACA. The following is what was adopted.

PROTECTING PATIENT ACCESS TO HEALTH INSURANCE COVERAGE, PHYSICIANS, AND QUALITY HEALTH CARE

RESOLVED, That our American Medical Association actively engage the new Administration and Congress in discussions about the future of health care reform, in collaboration with state and specialty medical societies, emphasizing our AMA's extensive body of policy on health system reform; and be it further

RESOLVED, That our AMA craft a strong public statement for immediate and broad release, articulating the priorities and firm commitment to our current AMA policies and our dedication in the development of comprehensive health care reform that continues and improves access to care for all patients; and be it further

RESOLVED, That our AMA Board of Trustees report back to our AMA House of Delegates at the Annual 2017 Meeting (A-17).

Resolution 208 – MIPS AND MACRA EXEMPTIONS asks that our American Medical Association support an exemption from the merit-based incentive payment system (MIPS) and Medicare Access and Chip Reauthorization Act of 2015 (MACRA) for small practices since these rules will hasten the demise of small private practice in the U.S.

OTHER ITEMS OF NOTE

There was a lot of discussion in the various meetings about the new administration. The AMA has a standing procedure to speak with both sides leading up to a presidential election. The AMA spoke with Trump leadership prior to election and has been in contact with them since the election.