Report from the American College of Nuclear Medicine (ACNM) Delegate to the American Medical Association (AMA) House of Delegates (HOD), June 15, 2016

It has been a pleasure and honor to serve as the ACNM Delegate to the AMA HOD for these past years. My appointment ends with this year’s AMA HOD annual meeting, and effective immediately, Dr. Erica Cohen is the new ACNM Delegate to the AMA HOD. Nominations and election are pending for a new Alternate Delegate to succeed Dr. Cohen.

Maintaining our designation and delegation within the AMA as an individual recognized specialty is crucial to our promoting continued unique representation in and to having our voice heard in the house of medicine.

Sincere regards,

Hadyn Williams, MD, FACNM, FACR

6/16/2016

Highlights: AMA Policy from 2016 House of Delegates:

1. Opposes VA proposal to expand Certified Nurse Practitioner authority to include interpreting imaging studies.

2. Expands its existing policy on gun safety to include support for waiting periods and background checks for all firearm purchasers, and to lobby Congress to overturn legislation that for 20 years has prohibited the Centers for Disease Control and Prevention (CDC) from researching gun violence.

3. Calls for the immediate end of any mandatory, recertifying examination by the American Board of Medical Specialties (ABMS) or other certifying organizations as part of the recertification process.

Physicians with lifetime board certification should not be required to seek recertification and no qualifiers or restrictions should be placed on diplomats with lifetime board certification recognized by the ABMS related to their participation in MOC.

AMA opposes restriction of a physician’s right to practice medicine without interference due to lack of recertification or participation in a Maintenance of Licensure, Maintenance of Certification program, or due to a lapse of a time-limited board certification.
https://www.federalregister.gov/articles/2016/05/25/2016-12338/advanced-practice-registered-nurses#h-4
In proposed § 17.415(d)(1)(i), a CNP [Certified Nurse Practitioner] would have full practice authority to provide: Histories, physicals; diagnose, treat, manage patients; order, perform, supervise, and interpret laboratory and imaging studies; prescribe medication, durable medical equipment; make referrals; aid in health promotion, disease prevention, health education, counseling.

Approved AMA Resolution: Late 1010 (A-16)
Subject: Fixing the Veterans Administration (VA) Physician Shortage with Physicians

Whereas, Within the VA, one in six positions were unfilled as of mid-July, 2015; and

Whereas, The VA is proposing to amend its internal medical regulations to permit full practice authority for all VA advanced practice registered nurses (APRNs) as a means of solving our veteran access to care crisis; and

Whereas, Our veterans deserve physician-led teams providing their medical care; therefore be it

RESOLVED, That our AMA work with the VA to enhance its loan forgiveness efforts to further incentivize physician recruiting and retention and improve patient access in the facilities (Directive to Take Action); and be it further

RESOLVED, That our AMA call for an immediate change in the Public Service Loan Forgiveness Program to allow physicians to receive immediate loan forgiveness when they practice in a VA facility. (New HOD policy)

2. AMA Resolution: Late 1011 (A-16)
Subject: Gun Violence as a Public Health Crisis

Whereas, In April 2015, seven physician organizations, the American Public Health Association and the American Bar Association called for policies to reduce firearm-related injuries and deaths, noting these to be a major public health problem; and

Whereas, In 1996, Congress passed the “Dickey” amendment stating that the Centers for Disease Control and Prevention (CDCP) could not fund research that would “advocate or promote gun control,” and the language has remained in each subsequent annual funding bill; and

Whereas, In April 2016, a coalition of 141 medical organizations sent a letter to four senior members of the House and Senate Appropriations Committees urging them to restore funding for gun violence research at the CDCP; therefore be it

RESOLVED, That our AMA immediately make a public statement that gun violence represents a public health crisis which requires a comprehensive public health response and solution (Directive to Take Action); and be it further

RESOLVED, That our AMA actively lobby Congress to lift the gun violence research ban. (Directive to Take Action)
June 15, 2016 – The AMA voted today to expand its existing policy on gun safety to include support for waiting periods and background checks for all firearm purchasers. Additionally, the AMA resolved to lobby Congress to overturn legislation that for 20 years has prohibited the CDCP from researching gun violence.

http://www.ama-assn.org/ama/ama-wire/blog/AMA_Meeting/1
http://www.ama-assn.org/sub/meeting/index.html

3. Res 309
Continuing Medical Education Pathway for Recertification

RESOLVED, That our AMA call for the immediate end of any mandatory, recertifying examination by the American Board of Medical Specialties (ABMS) or other certifying organizations as part of the recertification process (Directive to Take Action); and be it further

RESOLVED, That our AMA support a recertification process based on high quality, appropriate CME material directed by the AMA recognized specialty societies covering the physician’s practice area, in cooperation with other willing stakeholders, that would be completed on a regular basis as determined by the individual medical specialty, to ensure lifelong learning (Directive to Take Action).

Physicians with lifetime board certification should not be required to seek recertification and no qualifiers or restrictions should be placed on diplomats with lifetime board certification recognized by the ABMS related to their participation in MOC.


Res 315#
Maintenance of Certification (MOC) and Licensure (MOL) vs Board Certification, CME and Life-Long Commitment to Learning

RESOLVED, That the AMA oppose discrimination by any hospital or employer, state board of medical licensure, insurers, Medicare, Medicaid, and other entities, which results in the restriction of a physician’s right to practice medicine without interference (including discrimination by varying fee schedules) due to lack of recertification or participation in a Maintenance of Licensure, Maintenance of Certification program, or due to a lapse of a time-limited board certification. (New HOD Policy)