1	OHIO STATE MEDICAL ASSO	OCIATION 2021 HOUSE OF DELEGATES
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3	REPORT OF RE	SOLUTIONS COMMITTEE 1
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5	Presented by Tyler Campbell, MD, Chair,	1st District
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7	Rajiv R. Patel, MD	1 <sup>st</sup> District
8	Deepak Kumar, MD	2 <sup>nd</sup> District
9	William H Kose, MD	3 <sup>rd</sup> District
10	Robert Kose, MD	4 <sup>th</sup> District
11	Julia A. Heng, MD	5 <sup>th</sup> District
12	Sean McGrath, MD	6 <sup>th</sup> District
13		7 <sup>th</sup> District
14		8 <sup>th</sup> District
15	Richard Fankhauser, MD	Ohio Orthopaedic Society
16		Resident & Fellows Section
17	Jonathan C. Markle	Student Section
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All recommendations of the committee are provided on the Consent Calendar to be considered by the House of Delegates as one action to approve the Consent Calendar. A delegate may ask that a resolution be extracted. Extracted resolutions will be considered in numerical order from lowest to highest resolution number.

The AIA Standard Code of Parliamentary Procedure permits Resolutions 01-2021, 02-2021, 03-2021 and 04-2021 to be placed on the consent calendar even though they require a  $\frac{2}{3}$  vote for passage. Since the consent calendar is adopted by general consent, without objection, it is presumed that the House of Delegates has acted with the necessary 2/3 vote.

The Resolutions Committee can recommend the following actions: Adopt; Not Adopt; Refer; Amend.

Printed at the end of this report are the resolutions in the form as recommended by the committee. If the committee recommends amending the original statement, the amendments are shown by striking through the original language and capitalizing the new language (example: ene TWO).

Resolutions Committee 1, after giving careful consideration to the several items referred to it, moves that the Consent Calendar be adopted as presented.

40	CONSENT CALENDAR
41 42 43	The Consent Calendar includes the committee's recommendations for adoption, referral, or non-adoption of those resolutions referred to the committee for consideration.
44 45	*indicates that changes were made from recommendations in the preliminary report
46 47	RECOMMENDED FOR ADOPTION:
48 49 50	Resolution 00-2021 – 2021 OSMA Policy Sunset Report
51 52	Resolution 02-2021 – House of Delegates Ratio of Representation
53 54	Resolution 03-2021 – OSMA elections
55 56	Resolution 04-2021 – Constitution and Bylaws changes – membership category updates
57 58 59	RECOMMENDED FOR ADOPTION AS AMENDED:
60 61	Amended Resolution 01-2021 – Bylaws Updates and Corrections
62 63	*Amended Resolution 05-2021 – Ohio Telehealth
64 65 66	*Amended Resolution 06-2021 – Improving Patient Care Through Better Communication of Availability of Physician Specialists at Hospitals
67 68	*Amended Resolution 09-2021 – COVID-19 Vaccination Protocol
69 70	*Amended Resolution 10-2021 – Physician Communications in the Media
71 72 73	Amended Resolution 12-2021 – OSMA to Create an IMG (International Medical Graduate) Section
74 75 76	RECOMMENDED FOR REFERRAL TO COUNCIL:
77 78 79	Resolution 07-2021 – Protection of Informed Consent and Patient Autonomy with Administration of COVID-19 Vaccinations
80 81 82	Resolution 13 – 2021 – Advocate for the Creation of Scholarships, Reducing of Tuition and Waiving of Application Fees to Underrepresented Students in Medicine
83 84 85	RECOMMENDED FOR NON-ADOPTION:
86 87	Resolution 08-2021 – COVID-19 Vaccine Distribution
88 89	Resolution 11-2021 – Creating OSMA Resources/Programming to Address Physicians' Role in Medical Misinformation

90	Resolution 00-2021 – ADOPT
91 92 93 94 95	Ohio State Medical Association Policy Compendium Review – 2021 OSMA Policy Sunset Report OSMA policy from years 1932 through 2017 plus Policy 27 – 2020
96 97 98	<b>RESOLVED</b> , That the recommendations of OSMA Council published prior to the Annual Meeting as the 2021 OSMA Policy Sunset Report be adopted by the OSMA House of Delegates.
99 100 101 102	(This is a list of Policy numbers and titles. The full text of policies recommended "RETAIN" as edited and "NOT RETAIN" is contained in this report. All other OSMA policies will be retained as they are shown in the OSMA Policy Compendium available on www.osma.org.)
103	Policies to be Retained as Edited:
104 105 106 107 108	Policy 03 – 2017 – Expansion of U.S. Veterans' Healthcare Choices Policy 05 – 2017 – Veterans Health Administration Transparency and Accountability Policy 11 – 2017 – Third Party Patient Reimbursement for Out-of-Network Physicians Policy 15 – 2017 – Maintain the House of Delegates as the Legislative Body of the OSMA
109	Policies to be Not Retained:
110 111 112 113 114 115	Policy 02 – 2017 – Discriminatory Screening of Potential Patients  Policy 06 – 2017 – Direct American Medical Association to Ask CMS and HHS to Remove  Practice Expense and Malpractice Expense from Publicly Reported Payments  Policy 07 – 2017 – Improving Clinical Utility of Medical Documentation  Policy 27 – 2020 – OSMA Policy Sunset Report
116	Full text of policies recommended "RETAIN" as Edited and "NOT RETAIN"
117 118	NOT RETAIN Policy 02 – 2017 – Discriminatory Screening of Potential Patients
119 120 121 122	<ol> <li>The OSMA HOD directs the AMA Delegation to request that the AMA Council on Ethical and Judicial Affairs give an ethical opinion on discriminatory pre-screening tools before physicians accept patients in their practice.</li> </ol>
123	Comment: accomplished
124 125	RETAIN" as Edited Policy 03 – 2017 – Expansion of U.S. Veterans' Healthcare Choices
126 127 128 129 130 131	1. The OSMA House of Delegates directs the OSMA American Medical Association (AMA) Delegation to carry a resolution to our AMA House of Delegates 2017 Annual Meeting requesting that our AMA adopt as policy that the Veterans Health Administration expand SUPPORTS ALLOWING all eligible veterans' health care choices by permitting them to use funds currently spent on them through the VA system, through mechanisms such as premium support, to purchase private health care coverage, and for veterans over age 65 to use these funds to defray the costs of Medicare premiums and supplemental coverage.

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134 135 136 137 138	2. The OSMA House of Delegates directs the OSMA AMA Delegation to carry to our AMA House of Delegates 2017 Annual Meeting a resolution further requesting that our AMA actively support federal legislation to achieve this expansion of healthcare choices for Veterans Administration eligible veterans.
140 141 142 143 144	3. The OSMA by means of the OSMA website, as well as written letters to elected federal legislators and the U.S. President, again actively support federal legislation to achieve this reform of veterans' health care choices.
145	Comment: stricken portion accomplished
146 147 148	RETAIN" as Edited Policy 05 – 2017 – Veterans Health Administration Transparency and Accountability
149 150 151 152 153	<ol> <li>The OSMA House of Delegates directs the OSMA AMA Delegation to carry a resolution to our American Medical Association House of Delegates 2017 Annual Meeting requesting that our AMA adopt as policy SUPPORTS A REQUIREMENT that the Veterans Health Administration be required to report publicly on all pertinent aspects of its operation, including quality, safety, patient experience, timeliness, and cost effectiveness.</li> </ol>
155 156 157 158 159	2. The OSMA House of Delegates directs the OSMA Delegation to carry to our AMA House of Delegates 2017 Annual Meeting a resolution further requesting that our AMA actively support federal legislation to achieve this reform of Veterans Health Administration transparency and accountability.
161 162 163 164 165	3. The OSMA, by means of the OSMA website, as well as written letters to elected federa legislators and the U.S. President, actively supports federal legislation to achieve this reform of Veterans Health Administration transparency and accountability.
166	Comment: stricken portion accomplished
167 168 169	NOT RETAIN Policy 06 – 2017 – Direct American Medical Association to Ask CMS and HHS to Remove Practice Expense and Malpractice Expense from Publicly Reported Payments
170 171 172 173	<ol> <li>The OSMA ask its AMA Delegation to ask the AMA House of Delegates to petition CMS and the office of Health &amp; Human Services to remove practice expense and malpractice expense from reimbursements reported to the public.</li> </ol>
174	Comment: accomplished
175 176	NOT RETAIN Policy 07 – 2017 – Improving Clinical Utility of Medical Documentation

The OSMA AMA Delegation asks the AMA to advocate for appropriate, effective, and less burdensome requirements in the use of electronic health records.

180 Comment: accomplished

### RETAIN" as Edited Policy 11 – 2017 – Third Party Patient Reimbursement for Out-of-Network Physicians

- 1. The OSMA adopts a policy and provides support to physicians and patients which requires insurers and third-party payors to properly reimburse patients and/or out-of-network physicians their usual charges, and that there be no increase in deductibles or co-payments for those patients requiring care from out-of-network physicians because of urgent and emergent treatment needed in emergency rooms and hospitals.
- 2. The OSMA adopts a policy which requires insurers and third-party payors to reimburse patients and/or out-of-network physicians their usual charges in non-emergent care, if insurer and third-party payor are not able to arrange participating network physician care in a reasonable time, and that there be no increase in deductible or co-payments for those patients.
- 3. The OSMA directs the AMA Delegation to carry a request to our AMA to adopt a policy which requires insurers and third-party payors to properly reimburse patients and/or out-of-network physicians their usual charges, and that there be no increase in deductibles or co-payments for those patients requiring care from out-of-network physicians because of urgent and emergent treatment needed in emergency rooms and hospitals and/or seek federal legislation addressing these issues.
- Comment: stricken portion accomplished

## RETAIN" as Edited Policy 15 – 2017 – Maintain the House of Delegates as the Legislative Body of the OSMA

1. The OSMA House of Delegates shall remain in place as the legislative body of the OSMA, retaining all rights, privileges and authority as are now set forth in the OSMA Constitution and Bylaws.

2. The quorum of the HOD will be satisfied with the presence of the majority of the registered delegates. This will require a bylaws change and the OSMA Council is directed to write the appropriate language for voting at the annual meeting in 2018.

3. From 45 days up to the annual meeting of the HOD, underrepresented counties can be assigned active OSMA members who reside or work in that county or district by the district councilor to serve at the HOD. This may require a bylaws change and the OSMA Council is directed to write the appropriate language for voting at the annual meeting in 2018.

Comment: stricken portion accomplished

225		NOT RETAIN Policy 27 – 2020 – OSMA Policy Sunset Report
226 227 228 229	policies from available on w	f Delegates adopted the recommendations of OSMA Council regarding the 1932 through 2016 as is reflected in the 2020 OSMA Policy Sunset Report <a href="https://www.osma.org">www.osma.org</a> under Annual Meeting section. The possible actions for the policies to be Retained, Policies to be Retained as Edited and Policies to be Not Retained.
230	COMMENT:	Accomplished.
231 232	Fiscal Note:	\$0 (Sponsor) \$0 (Staff)
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236	Resolution 01 – 2021 - AMEND
237 238	Constitution and Bylaws – updates and corrections
239 240	COMMENTS: The Committee noted that there were no comments opposed to the Committee's preliminary recommendation/proposed amendment.
241 242 243 244 245 246	Preliminary comments: The Committee discussed the suggested removal of the disciplinary process and decided to insert language suggested by the Chair of the Bylaws Committee with a minor amendment. The language preserves the right to evaluate discipline involving a member using a less prescriptive process. See Chapter 1, new Section 6. In the same chapter, Legal Counsel reinserted Section 7 - Limitation of Liability to protect committee members should the disciplinary process be necessary.
247 248	ARTICLE II
249 250	COMPONENT SOCIETIES OSMA DISTRICTS
251 252	<b>Section 1. Definition.</b> Component Societies shall consist of those county medical societies which now hold, or may hereafter receive, charters from this Association.
253 254 255 256 257	<b>Section 2. Geographical Scope.</b> Not more than one (1) Component Society shall be chartered in any one (1) county; provided, however, that a charter may be granted to a society comprising two or more counties, or parts thereof, when, in the judgment of the House of Delegates, the chartering of a multi-county society is in the best interests of this Association; and provided further, that whenever two
258 259 260	(2) or more Component Societies holding charters from this Association shall request in writing that they be organized into a single multi-county society, the House of Delegates may grant a charter to such society.
261 262 263 264	Section 3. Membership in Adjoining Society. If there is an insufficient number of physicians in any county to form a Component Society, such physicians may become members of the Component Society of an adjoining county, if they are otherwise eligible under the constitution and bylaws of such adjoining Component Society.
265 266 267 268 269	THE HOUSE OF DELEGATES SHALL ESTABLISH THE NUMBER AND SIZE OF OSMAD DISTRICTS WITHIN THE STATE TAKING INTO ACCOUNT GEOGRAPHIC BOUNDARIES AND NUMBER OF PHYSICIANS RESIDING OR PRACTICING WITHIN EACH DISTRICT. THE OSMA COUNCIL SHALL EVALUATE THE NUMBER AND SIZE OF DISTRICTS EVERY FIVE YEARS AND RECOMMEND CHANGES, IF ANY, TO THE HOUSE OF DELEGATES.
270 271 272 273 274	WITHIN EACH OSMA DISTRICT, PHYSICIANS IN EACH COUNTY MAY FORM SELF-GOVERNING COUNTY SOCIETIES OR MULTI COUNTY SOCIETIES. MEMBERS OF THE COUNTY OR MULTI COUNTY SOCIETIES ARE NOT REQUIRED TO BE MEMBERS OF OSMA BUT ONLY OSMA MEMBERS WILL BE COUNTED FOR PURPOSES OF DETERMINING DELEGATE COUNTS FOR EACH DISTRICT TO THE HOUSE OF DELEGATES.

276 ARTICLE V

277 MEETINGS

**Section 1. Annual Meeting.** This Association shall hold an Annual Meeting at which there shall be a meeting of the House of Delegates.

**Section 2. Time and Place of Annual Meeting.** The time and place for holding each Annual Meeting shall be fixed by the Council of this Association and Delegates shall be physically present EXCEPT WHEN THE OSMA COUNCIL DETERMINES THAT EXTRAORDINARY CIRCUMSTANCES EXIST THAT MAKE IT IMPOSSIBLE OR INADVISABLE FOR DELEGATES TO BE PHYSICALLY PRESENT.

Section 3. Special Meetings. Special meetings of the House of Delegates shall be called by the President or other officer upon a two-thirds (2/3) vote of the Council or upon filing, with the Chief Executive Officer of this Association, a petition duly authorized and signed by the presidents of at least twenty-three (23) Component Societies and that a president who signs a petition to call a special session of the House of Delegates must act as a representative of his/her society, such that he/she expresses the will of the society established by a majority vote on the issue concerning the need for the meeting, conducted during a meeting of the society or its executive committee, if any exists, at which a quorum is present according to the county society's bylaws, and that verification of this meeting and the results of the voting must be forwarded to OSMA headquarters to validate the President's signature on the petition AT LEAST FIFTY ACTIVE MEMBERS RESIDING OR PRACTICING IN AT LEAST TWO OSMA DISTRICTS. Within ten (10) days after such action of the Council, or the filing of such petition, the Chief Executive Officer shall give written notice to the members of the House of Delegates setting forth the purpose or purposes of such meeting and specifying the time and place thereof, in no event shall the meeting be less than twenty (20) days nor more than sixty (60) days after the mailing of such written notice.

**Section 4.** At least ten (10) days advance notice of meetings of members shall be published in print or shall be given by use of authorized communications equipment as defined in Section 5.

**Section 5.** Members and Councilors may attend and participate in all meetings of this Association, including participation by casting any vote that the member or Councilor is qualified to cast, in person or via the use of authorized communication equipment if use of such equipment is approved by the Council. Any member participating in a meeting via authorized communications equipment shall be considered "present" at that meeting for all relevant purposes. Any recorded transmission by authorized communications equipment shall be considered "written" or a "writing" for all relevant purposes stated in the Constitution and Bylaws. The Council shall establish procedures and guidelines for the use of authorized communications equipment in order to permit the Council to verify that a person is a voting member and to maintain a record of the person's presence and any relevant vote that person casts by use of the authorized communications equipment.

As used in this section and these Constitution and Bylaws, "authorized communications equipment" means any communications equipment that provides a transmission, including, but

not limited to, by telephone, telecopy, or any electronic means, from which it can be determined that the transmission was authorized by, and accurately reflects the intention of, the member or Councilor involved and, with respect to meetings, allows all persons participating in the meeting to contemporaneously communicate with each other.

Section 6. Conduct of Meetings. Meetings of the Association may be held in person or by means of authorized communications equipment as defined in this Article if use of such equipment is approved by the Council except as stated in Section 2 of this Article. Voting members who are not physically present at a meeting of voting members may attend the meeting by the use of authorized communications equipment that enables the voting members an opportunity to participate in the meeting and to vote on matters submitted to the voting members, including an opportunity to read or hear the proceedings of the meeting, participate in the proceedings, and contemporaneously communicate with the persons who are physically present at the meeting. Any voting member who uses authorized communications equipment is deemed to be present in person at the meeting whether the meeting is held at a designated place or solely by means of authorized communications equipment. The Council may adopt procedures and guidelines for the use of authorized communications equipment in connection with a meeting of voting members to permit the Association to verify that a person is a voting member and to maintain a record of any vote or other action taken at the meeting.

#### ARTICLE VI OFFICERS

**Section 1. General.** The Officers of this Association shall be a President who shall act as Speaker of the House of Delegates, President-Elect who shall act as Vice-Speaker of the House of Delegates, the Immediate Past President, a Secretary-Treasurer, and Councilors.

**Section 2. Election and Eligibility.** The President-Elect and Secretary-Treasurer of this Association shall be elected by the House of Delegates. Geographic District Councilors shall be elected by the voting members in councilor OSMA districts. At-large Councilors shall be elected by all voting members in a statewide election. Councilors representing sections authorized in Article IV shall be elected by the section. No person shall be eligible for an elective office who has not been a voting member of this Association during the entire preceding two (2) years. The terms of the Officers of this Association shall be as prescribed by Chapter 6 of the Bylaws of this Association.

#### ARTICLE IX SEAL

This Association shall have an official seal bearing the legend "Ohio State Medical Association - 1846." The power to change or renew the seal shall rest with the House of Delegates in conformity with the laws of the State of Ohio.

355 ARTICLE X
356 REFERENDUM

SECTION 1. By a two-thirds (2/3) vote of the Delegates present at a meeting of the House of Delegates, a general referendum shall be held upon any question then pending before it

SECTION 2. Upon a petition duly authorized and signed by the governing bodies of at least one half (1/2) of the Component Societies AT LEAST FIFTY ACTIVE MEMBERS RESIDING OR PRACTICING IN AT LEAST TWO OSMA DISTRICTS and filed with the Chief Executive Officer on or before the thirtieth (30th) day following the adjournment of a meeting of the House of Delegates, a general referendum shall be held upon any action taken at such meeting.

The procedure to be followed in connection with the submission to a referendum of any referred question or action shall be as set forth in Chapter 14 of the Bylaws of this Association. If the referred question is in respect to a proposed amendment to this Constitution, an affirmative vote of two-thirds (2/3) of those voting in such referendum shall be required to determine the referred question. Furthermore, if the referred action of the House of Delegates is in respect to the adoption by the House of Delegates of an amendment to this Constitution, a vote of two-thirds (2/3) of those voting in such referendum shall be required to reject and nullify the action of the House of Delegates in adopting such amendment.

## ARTICLE XI AMENDMENTS

**Section 1. Method of Amending.** The House of Delegates may amend any Article of this Constitution by a two-thirds (2/3) vote of the Delegates and Officers registered at the Annual Meeting or at any special meeting called for that purpose provided, however, that such proposed amendment shall have been published by this Association, or sent to all voting members of this Association, at least thirty days before such meeting and that a true and correct copy thereof shall have been sent to the secretary of each Component Society at least thirty (30) days before such meeting.

Section 2. Conformity by Component Societies. When an amendment to this Constitution has been duly adopted, the secretary of each Component Society shall be notified in writing by the Chief Executive Officer within sixty (60) days after such amendment has become effective. It shall become incumbent upon each Component Society to make such change in its constitution and bylaws or its articles of incorporation and code of regulations or other fundamental body of rules for the government of the corporation, as will bring about conformity to the change in the Constitution of this Association. The secretary of such Component Society shall file with this Association a copy of such changes in the Component Society's constitution and bylaws together with written notice of compliance with the provisions of this Section within one hundred and eighty (180) days after it receives notice.

**Section 3.** At no time may a proposal to amend the OSMA Constitution include an attempt to nullify and void the effect of the OSMA Bylaws. The OSMA Constitution and the OSMA Bylaws documents shall each require a separate action to be rendered null and void.

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Section 6. Disciplinary Procedure. Disciplinary action may be taken by this Association against a member of this Association only upon written charges signed by three (3) or more members of this Association and filed with the Chief Executive Officer.

405 (a) Council, upon receiving a written charge as set forth above, shall refer the request 406 to a standing or ad hoc Grievance Committee. If the Grievance Committee, after reviewing the 407 408 409 410 411 412

charges, concludes that an investigation is warranted, it shall conduct an investigation. The Grievance Committee shall proceed with the investigation in a prompt manner. The member shall be notified that an investigation is being conducted and shall be given an opportunity to provide information in a manner and upon such terms as the Grievance Committee deems appropriate. The Grievance Committee may, but is not obligated to, conduct interviews with persons involved. Such investigation shall not constitute a "hearing" as that term is used in these Bylaws. The Grievance Committee shall consider the findings of the investigation and determine whether disciplinary action is advisable. The Grievance Committee may, in its

415 discretion, proceed forward with the disciplinary action, dismiss the charges, or refer the charges to another appropriate entity for handling. 416

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(b) If the Grievance Committee determines that disciplinary action is advisable, it shall direct the Chief Executive Officer to provide notice to the member. The notice shall state the action proposed to be taken against the member, the reasons for the action, the right of the member to request a hearing within thirty (30) days of the date of the notice, and a summary of the rights and procedures to be followed during the hearing. The member shall have thirty (30) days following the date of the notice of such action to request a hearing. The request shall be in writing addressed to the Chief Executive Officer.

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If the member does not request a hearing in the time and manner described, the member shall be deemed to have waived any right to a hearing and to have accepted the recommendation involved. The written investigation report shall be forwarded to the standing or ad hoc Committee on Judicial and Professional Relations which shall determine the action to be taken. The member under this section shall have no further rights to hearing or appeal unless the action taken differs from the recommendation of the Grievance Committee.

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(c) Upon receipt of a request for hearing, the matter shall be referred to a standing or ad hoc Committee on Judicial and Professional Relations or a standing or an ad hoc Committee on Peer Review which shall appoint a hearing officer or panel of individuals to conduct the hearing who may be one (1) or more of its members of the standing or ad hoc committee provided such hearing officer or panel members may not be in direct economic competition with the member. A hearing shall be scheduled to commence not less than thirty (30) days nor more than ninety (90) days from the date of receipt of the request for hearing. The Chief Executive Officer shall send the member a notice stating the place, time, and date of the hearing and a list of the witnesses, if any expected to testify at the hearing on behalf of the Grievance Committee.

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have a reasonable opportunity to be heard and to present relevant oral and documentary evidence in an efficient and expeditious manner, and that proper decorum is maintained. The hearing officer or panel shall be entitled to determine the order of, or procedure for, presenting evidence and arguments during the hearing and shall have the authority and discretion to make all rulings on questions which pertain to matters of law, procedure or the admissibility of evidence. If the hearing officer or panel determines that either side in a hearing is not proceeding in an efficient and expeditious manner, the hearing officer or panel may take such discretionary action as seems warranted by the circumstances.

The hearing officer or panel may, but shall not be required to, order that oral evidence be taken only on oath administered by any person lawfully authorized to administer such oaths. Judicial rules of evidence and procedure relating to the conduct of the hearing, the examination of witnesses, and the presentation of evidence shall not apply to a hearing conducted under these Bylaws. Any relevant evidence, including hearsay, shall be admitted if it is the sort of evidence upon which reasonable people are accustomed to rely in the conduct of serious affairs regardless of the admissibility of such evidence in the court of law. The hearing officer or panel may interrogate the witnesses or call additional witnesses, if the hearing officer or panel deems such action appropriate.

(d) Both the member and the Grievance Committee have the right to be represented in any phase of the hearing or preliminary procedures by an attorney at law or by any other person of that party's choice; to have a record made of the proceedings, copies of which may be obtained by the member upon payment of any reasonable charges associated with the preparation thereof; the Grievance Committee, the accused, legal counsel for the accused or the Grievance Committee or any other person of either party's choice shall have the right to call, examine, cross-examine, and impeach witnesses; to present

evidence determined to be relevant by the hearing officer or panel, regardless of its admissibility in a court of law; and to submit a written statement at the close of the hearing.

Unless otherwise determined for good cause, the Grievance Committee shall have the initial duty to present evidence for each case or issue in support of the proposed action or recommendation. The member shall be obligated to present evidence in response. Throughout the hearing, the Grievance Committee shall bear the burden of persuading the hearing officer or panel, by a preponderance of the evidence, that the action or recommendation is reasonable and warranted.

Failure without good cause of the member to personally attend the hearing shall be deemed to constitute acceptance of the disciplinary action involved, and a waiver of the right to a hearing. Postponements and extensions of the time beyond the time for hearing permitted in these Bylaws may be permitted by the hearing officer or panel, within his/her/their discretion on a showing of good cause.

(e) The recommendation of the hearing officer or panel shall be based on the evidence introduced at the hearing, including all logical and reasonable inferences from the evidence and the testimony. Within thirty (30) days after the final adjournment of the hearing, the hearing officer or panel shall render a recommendation which shall be accompanied by a report in writing stating the reasons for the recommendation. The report and recommendation shall be delivered to the Committee on Judicial and Professional Relations and to the member. At its

next regular meeting after receipt of the report and recommendation, or as soon thereafter as is practicable, the Committee on Judicial and Professional Relations shall consider the report, recommendation, and any other relevant information. It shall then make a final decision regarding the proposed disciplinary action, and notify Council of its decision. Following the decision, the Chief Executive Officer shall forward to the member the written decision of the committee, including a statement of the basis for the decision.

(f) Any member against whom disciplinary action has been taken pursuant to these Bylaws shall have the right of appeal to Council. Such appeal must be commenced by a written notice directed to the Chief Executive Officer within thirty (30) days after the date on which the notice of final decision was mailed to the member. The member asserting a right to appeal shall bear all expenses associated with providing a copy of the record from the disciplinary proceeding and for production of any record associated with the appeal.

 Upon receipt of notice of appeal, Council shall serve as the appellate panel. The member appealing shall submit a written statement discussing the relevant facts and issues. Within twenty (20) days following this submission of the member's written statement, the Grievance Committee may submit a written response to that statement. The member may submit a written reply within ten (10) days following the submission of the Grievance Committee's response.

The Council may, upon its own motion or request by the member or Grievance Committee, schedule oral arguments upon the issues raised in the appeal. The oral arguments, if scheduled, shall be held within twenty (20) days following the submission of the final written brief.

The Council shall, within twenty (20) days after the oral arguments or the final written submission if oral arguments are not conducted, render a written opinion setting forth its decision whether to accept, reject or modify the decision of the Committee on Judicial and Professional Relations stating the basis for its decision. The Chief Executive Officer shall forward a copy of the decision to the member, the Grievance Committee and the Committee on Judicial and Professional Relations.

(g) The accused member may appeal the decision of the Council on questions of law and procedure, but not of fact, to the Council on Ethical and Judicial Affairs of the American Medical Association (the "Judicial Council") by filing a notice of appeal with the Judicial Council within thirty (30) days of the decision of Council, such appeal to be governed by the rules and regulations of the Judicial Council.

(h) After final action has been taken pursuant to subdivision (b) or (e) of this section, and the member has either waived or exhausted the right to appeal to Council and the right to appeal to the Judicial Council, the Chief Executive Officer shall report the action to state and federal authorities as required by Ohio Revised Code 4731.224, and the Health Care Quality Improvement Act of 1986 (Public Law 99-660, Title IV and 45 CFR Part 60) and other applicable federal and state laws.

(i) Once a complaint under Section 6 of this Chapter has been made against a member, this Association may complete the proceedings under these Bylaws even if the member has resigned.

Section 6. Disciplinary Procedure. THE COUNCIL SHALL CONSIDER ALL QUESTIONS INVOLVING THE RIGHTS AND STANDING OF MEMBERS, WHETHER IN RELATION TO OTHER MEMBERS OR TO THIS ASSOCIATION. ALL QUESTIONS OF AN ETHICAL NATURE BROUGHT BEFORE THE HOUSE OF DELEGATES AND/OR COUNCIL INVOLVING THE PROFESSIONAL RELATIONS OF INDIVIDUAL PHYSICIANS OR GROUPS OF PHYSICIANS SHALL BE REFERRED TO COUNCIL WITHOUT DISCUSSION. THE COUNCIL SHALL HAVE FULL POWER AND AUTHORITY TO REFER TO A COMMITTEE OR TASK FORCE OR HEAR AND DECIDE ALL QUESTIONS OF DISCIPLINE AFFECTING THE CONDUCT OF MEMBERS OF THIS ASSOCIATION. ITS DECISIONS IN ALL CASES, INCLUDING QUESTIONS REGARDING THE RIGHT OF MEMBERSHIP IN THIS ASSOCIATION, SHALL BE FINAL.

Section 7. Limitation of Liability. No member, agent or employee serving on a utilization committee, a peer review or professional standards review committee, including any person participating in the context of the process set forth in the disciplinary Chapter of these Bylaws shall be deemed liable in damages to any person for any action taken or recommendation made within the scope of the functions of said committee, if such committee member, agent or employee acts without malice and in the reasonable belief that such action or recommendation is warranted by the facts known to the person after reasonable effort to obtain the facts of the matter as to which such action is taken or recommendation is made. No person against whom disciplinary action is instituted pursuant to the disciplinary Chapter of these Bylaws shall have any claim or cause of action against this Association, or against any officer, Councilor, member, agent or employee of this Association, by reason of the institution, prosecution, or disposition of such charges or the hearing or consideration thereof.

SECTION 7. LIMITATION OF LIABILITY. NO MEMBER. AGENT OR EMPLOYEE

SERVING ON A UTILIZATION COMMITTEE, A PEER REVIEW OR PROFESSIONAL STANDARDS REVIEW COMMITTEE, INCLUDING ANY PERSON PARTICIPATING IN THE CONTEXT OF THE PROCESS SET FORTH IN THE DISCIPLINARY CHAPTER OF THESE BYLAWS SHALL BE DEEMED LIABLE IN DAMAGES TO ANY PERSON FOR ANY ACTION TAKEN OR RECOMMENDATION MADE WITHIN THE SCOPE OF THE FUNCTIONS OF SAID COMMITTEE, IF SUCH COMMITTEE MEMBER, AGENT OR EMPLOYEE ACTS WITHOUT MALICE AND IN THE REASONABLE BELIEF THAT SUCH ACTION OR RECOMMENDATION IS WARRANTED BY THE FACTS KNOWN TO THE PERSON AFTER REASONABLE EFFORT TO OBTAIN THE FACTS OF THE MATTER AS TO WHICH SUCH ACTION IS TAKEN OR RECOMMENDATION IS MADE. NO PERSON AGAINST WHOM DISCIPLINARY ACTION IS INSTITUTED PURSUANT TO THE DISCIPLINARY CHAPTER OF THESE BYLAWS SHALL HAVE ANY CLAIM OR CAUSE OF ACTION AGAINST THIS ASSOCIATION, OR AGAINST ANY OFFICER, COUNCILOR, MEMBER, AGENT OR EMPLOYEE OF THIS ASSOCIATION, BY REASON OF THE INSTITUTION, PROSECUTION, OR DISPOSITION OF SUCH CHARGES OR THE HEARING OR CONSIDERATION THEREOF.

579 CHAPTER 7
580 THE COUNCIL

**Section 1. Powers and Duties of the Council.** The Board of Trustees (referred to herein as "the Council") shall be the executive body of this Association. Between meetings of the House of Delegates, the Council shall have and exercise all the powers and authority conferred on the House of Delegates by the Constitution and these Bylaws. In the exercise of the interim powers thus conferred upon it, the Council shall take no action contravening any general policy which shall have been adopted by the House of Delegates and which is then in effect.

The Council shall have direction of the investment and reinvestment of the funds of this Association.

The Council shall consider all questions involving the rights and standing of members, whether in relation to other members, to the Component Societies, or to this Association. All questions of an ethical nature brought before the House of Delegates involving the professional relations of individual physicians or groups of physicians shall be referred to the Council without discussion. The Council shall have full power and authority to refer to a committee or task force or hear and decide all questions of discipline affecting the conduct of the members of this Association or the conduct of a Component Society. Its decisions in all cases, including questions regarding the right of membership in this Association, shall be final.

The Council shall provide for and superintend the issuance of any publications of the Ohio State Medical Association. It shall have full power and authority to appoint a medical editor or publication board, or both, and make any other provisions for the publication of any publications which in its judgment are feasible including full discretionary power: (1) to promulgate rules and regulations governing any publications; (2) to enumerate and define the powers and duties of the medical editor or publication board, or both; and (3) to fix the terms and conditions of their appointment.

The Council shall have full power and authority to employ a Chief Executive Officer, who need not be a physician or member of this Association. The Chief Executive Officer may employ such other employees as are deemed necessary or advisable.

The Council shall provide such offices for the headquarters of this Association as may be required properly to conduct its business.

# CHAPTER 8 DELEGATES AND ALTERNATE DELEGATES TO THE AMERICAN MEDICAL ASSOCIATION (AMA)

**Section 1. Organization.** As soon as practicable after their election and installation, The Delegates and Alternate Delegates to the American Medical Association shall nominate from their membership candidates for THE MEET ANNUALLY TO NOMINATE AND ELECT A Chair and Vice-Chair of the delegation and the Council of this Association shall elect one(1) of

such nominees as Chair and one(1) as Vice Chair. The President of this Association will be SHALL SERVE AS ex-officio Co-Chair of the delegation.

**Section 2. Duties of the Chair.** The Chair shall act as Co-Chair with the President of this Association at meetings of the delegation. The Chair shall appoint such committees as may be necessary to assist with the work of the delegation. The Chair shall report periodically for the delegation to the Council of this Association. THE CHAIR SHALL REVIEW THE DELEGATION HANDBOOK ANNUALLY AND SHALL REPORT ANY CHANGES TO THE COUNCIL.

**Section 3. Duties of the Vice-Chair.** The Vice-Chair shall perform the duties of the Chair when the Chair is absent or otherwise unable to function.

Section 4. Duties of American Medical Association Delegation Members.

DELEGATION MEMBER DUTIES SHALL BE OUTLINED IN A DELEGATION HANDBOOK AND UPDATED ANNUALLY. Members of the Ohio delegation to the American Medical Association are expected to attend all sessions of the AMA House of Delegates and all Ohio AMA delegation functions. Members of the Ohio delegation to the AMA must prepare for each AMA House of Delegates meeting by reviewing materials sent to them and participate in the deliberations of various committees to which they may be assigned. Members of the Ohio delegation to the AMA shall participate in membership promotion activities in their local societies and districts for both the OSMA and the AMA.

## 638 CHAPTER 9 639 COMMITTEES

**Section 1. Committees.** The standing committees of this Association shall be the Committee on Auditing and Appropriations and the Committee on Judicial and Professional Relations. All other committees and task forces of this Association shall be appointed by the President.

# 645 CHAPTER 10 646 COMPONENT 647 SOCIETIES

Section 1. Organization and Charter of Societies. To be eligible to receive a charter as a Component Society of this Association from the House of Delegates, an application must first be submitted to Council for approval. In addition to the applicant society's submission of a constitution and bylaws or articles of incorporation, codes of regulations, bylaws or other fundamental bodies of rules of the society's government, the Council will consider an application for approval which provides evidence that the applicant society: 1) has adopted principles of organization in conformity with the Constitution and Bylaws of this Association; 2) has adopted and takes actions which are consistent with the Principles of Medical Ethics, and 3) whose actions and governing rules are in substantial compliance with the laws of the state of Ohio and/or the United States of America. Charters issued by this Association shall be signed by the President and the Secretary-Treasurer of this Association.

Delegates shall have authority and power to suspend or revoke a charter issued to any component society of this Association. Between meetings of the House of Delegates the Council, pursuant to Chapter 7 of these Bylaws, shall have final authority and power to suspend or revoke a charter issued to any component society. The charter of any component society may be suspended or revoked when a component society's actions are: 1) in conflict with the Constitution or Bylaws of this Association; 2) disparaging to the OSMA; 3) in conflict with the Principles of Medical Ethics, or 4) not in substantial compliance with the laws of the state of Ohio and/or the United States of America.

Council shall adopt and cause to be published to the component societies, procedures to govern suspension or revocation of the charter of a component society. Such procedures shall require that the component society receive written notice stating the reason for the proposed suspension or revocation and an opportunity to respond in person or in writing.

Section 3. Title of a Component Society. The name and title of each Component Society shall read exactly as found in its charter. No change in such name shall be made without the approval of the Council of this Association.

**Section 4. Custody of Charter.** The charter of each Component Society, as issued by this Association, shall be preserved and shall be kept in the custody of the secretary of such Component Society at all times.

Section 5. Constitutions of Component Societies. Each unincorporated Component Society shall have a constitution and bylaws. Each incorporated Component Society shall have, in addition to articles of incorporation as required by law, a constitution, a code of regulations, a code of bylaws, or other fundamental body of rules for its government similar in content and form to the bylaws of unincorporated Component Societies. All such constitutions, bylaws, articles of incorporation, codes of regulations and other fundamental bodies of rules and all other rules and regulations adopted by a Component Society shall not be in conflict with the Constitution and bylaws of this Association, and a copy thereof shall be transmitted to the headquarters of this Association for approval and recording. The bylaws of each unincorporated Component Society, and the code of regulations, code of bylaws, or other fundamental body of rules of each incorporated society shall set forth specifically the duties of the several officers and of its executive body (Council or trustees).

Section 6. Rules, Regulations and Changes in Constitution and Bylaws of Component Societies. Whenever a Component Society makes a change or amendment in its constitution, bylaws, articles of incorporation, code of regulations, or other fundamental body of rules for its government, or adopts any rules or regulations, which affect the relationship of the Component Society with this Association or the rights of any Association member, such change, amendment, rule or regulation shall be submitted to the Council of this Association for written approval, and shall not become effective until such approval has been given.

Section 7. Functions and Duties of Component Societies. Each Component Society shall have general direction of the business and affairs of the profession in the county, and it shall exert its influence to promote the science and art of medicine, the moral condition of the membership, and the betterment of public health.

Section 8. Official Records of Component Societies. The official copy of the constitution and bylaws of each unincorporated Component Society, and the official copy of the

articles of incorporation, code of regulations, code of bylaws or other fundamental body of rules of each incorporated Component Society, shall be kept by such Component Society in a special book provided for that purpose. All amendments which have been approved by the Council of this Association shall be entered in a special book.

**Section 9. Combined Component Societies.** The House of Delegates shall have authority to organize the physicians of two (2) or more counties, or parts thereof, into a multicounty society to be designated by hyphenating the names of such counties so as to distinguish them from a district or single county society. Such multi-county societies, when organized and chartered, shall be entitled to all the privileges and representatives provided herein for Component Societies.

## CHAPTER 11 MEMBERSHIP IN COMPONENT SOCIETIES

Section 1. Qualifications for Membership in a Component Society. Each Component Society shall be the sole judge of the qualifications necessary for any and all classes of membership in such society.

## CHAPTER 14 REFERENDUM

Within sixty (60) days after a general referendum has been ordered either by the (1) House of Delegates, or (2) upon the petition of the presidents of at least twenty three (23) Component Societies AT LEAST FIFTY ACTIVE MEMBERS RESIDING OR PRACTICING IN AT LEAST TWO OSMA DISTRICTS as prescribed in Article X of the Constitution, the Chief Executive Officer shall prepare and have printed and mailed by first-class mail or sent by means of authorized communications equipment to each Active Member of this Association an official eircular COMMUNICATION setting forth the following:

(a) A resume of the provisions in this Constitution and Bylaws applying to a general referendum;

(b) An announcement by the President as to the time set for closing the polls which shall be not less than fifteen (15) days or more than thirty (30) days after the mailing REFERENDUM COMMUNICATION of circulars and ballots:

(c) The resolution, motion or action submitted to referendum;

(d) A statement of not more than two hundred (200) words prepared by the proposer or proposers of the resolution, motion or action giving arguments in its favor;

(e) A statement of not more than two hundred (200) words giving arguments in opposition prepared by one or more members appointed by the President from among those opposed to the resolution, motion or action;

(f) INSTRUCTIONS FOR REPLYING AND/OR COMPLETING VOTING ON THE RESOLUTION, MOTION OR ACTION.

Enclosed with the circular shall be an official reply envelope and a ballot labeled with the official seal of this Association, or instructions for replying by means of authorized communications equipment. On the ballot the resolution, motion or action shall be printed and below it shall be spaces for the indication of "yes" or "no" by making a cross mark. The reply envelope or authorized communications equipment ALL responses shall be ADDRESSEDRETURNED OR REFERRED TO a special THE HOUSE OF DELEGATES committee of three (3) tellers appointed by the President and it shall carry return first class postage or the equivalent thereof under the postal regulations if applicable ON ELECTIONS.

To be counted by the tellers COMMITTEE a ballot shall meet the following requirements:

(a) Either "yes" or "no" must be clearly indicated with a cross mark;

(b) The ballot must be received by the committee of tellers in the sealed official reply envelope by first-class postage or by means of authorized communications equipment or ELECTRONIC BALLOTING on or before the day set for closing the polls; and

(c) The ballot must be an official ballot mailed or sent by means of authorized communications equipment OR ELECTRONIC BALLOTING to each Active Member, duly labeled with the seal of this Association.

Within ten (10) days following the time set for closing the polls, the tellers COMMITTEE ON ELECTIONS shall meet at the headquarters office of this Association or by means of authorized communications equipment to open the envelopes containing the ballots and poll the votes in the presence of each other, or consistent with the procedures and guidelines adopted by Council for use of authorized communications equipment OR ELECTRONIC BALLOTING for voting and conduct of meetings, keeping in mind that the referendum is not valid unless participated in by not less than one-half (1/2) of the Active Members of this Association.

 The results of the referendum shall be transmitted in writing by the tellers COMMITTEE to the President immediately after the count has been completed. The President shall announce such results to the members of the Council and publication thereof shall be made to the Active Members.

Except as otherwise provided in Article X of the Constitution of this Association, a resolution, motion or action receiving a majority of the votes cast in a valid referendum, shall be declared adopted, carried or ratified, as the case may be, and the same shall become effective fifteen (15) days after the results of the referendum have been published.

As used in this section, "authorized communications equipment" shall have the same meaning as defined in Article V of the OSMA Constitution.

785 **CHAPTER 16** 786 **AMENDMENTS** 787 788 Section 1. Method of Amending. These Bylaws may be amended at any Annual Meeting of the House of Delegates by a two-thirds (2/3) vote of the Delegates present at that 789 session, provided that the proposed amendment shall have been published to the Active 790 Members or mailed to Active Members of this Association at least thirty (30) days prior to the 791 Annual Meeting. 792 793 Section 2. Conformity by Component Societies. When an amendment of these 794 Bylaws has been adopted as provided in Section 1 hereof, it shall be the duty of the Chief Executive Officer to notify the secretary of each Component Society within sixty (60) days after 795 such amendment has become effective. It shall become incumbent upon each Component 796 Society to make such changes in its constitution and bylaws, or, if the society be a corporation, 797 798 in its articles of incorporation, code of regulations, code of bylaws, or other fundamental body 799 of rules for the government of the corporation, as will bring about conformity to the change in 800 the Bylaws of this Association. 801 Within one hundred and eighty (180) days after such notification to each Component 802 Society, written notice of compliance by such Component Society with provision, together with 803 copies of the changes made to effect such compliance, shall be sent by the secretary of such 804 Component Society to the Council for its review and approval. 805 Section 3. At no time may a proposal to amend these OSMA Bylaws include an attempt to nullify and void the effect of the OSMA Constitution. The OSMA Constitution and 806 the OSMA Bylaws documents shall each require a separate action to be rendered null and 807 808 void. \$ 500 (Sponsor) 809 **Fiscal Note:** \$ 500 (Staff) 810 811 812 813 814 815

### Resolution 02-2021 – ADOPT House of Delegates Ratio of Representation

COMMENTS: During open hearing testimony, Dr. Hubbell provided clarification that the quorum is based on the number of delegates registered, not those eligible, to attend. The Committee recommends adoption of this resolution.

Preliminary comment: The Committee discussed the proposed changes and commended the Bylaws Committee for creating the proposed changes. There was a question of whether this change would affect the quorum. The Committee discussed whether this resolution would affect specialty society representation. The Committee agreed with one of the comments that suggested that the specialty section ratio should also be changed but did not think it was appropriate to make those changes through this resolution. The Committee suggests that Council review the specific bylaws that address this issue and make changes, if appropriate. Ultimately, the Committee decided to recommend adoption to accept the proposed changes to the bylaws.

**Resolved**, that the OSMA Constitution and Bylaws be amended to read as follows (showing only sections affected):

#### BYLAWS CHAPTER 4

Section 2. OSMA District Delegates Ratio of Representation. Each OSMA District shall be entitled to one (1) Delegate and one (1) Alternate Delegate in the House of Delegates for each one hundred (100)-FIFTY (50) Active Members and Retired Members working or residing in the district as of December 31st of the preceding year. ;provided however, that each County within a district shall be entitled to at least one (1) Delegate and one (1) Alternate Delegate who works or resides in the county. If the total number of Active members and Retired members in the district is not evenly divisible by one hundred (100) FIFTY (50), that district shall be entitled to one (1) additional delegate and one (1) additional alternate in the House of Delegates. The names of such Delegates and Alternate Delegates shall be submitted to the Association prior to the opening of the House of Delegates.

Members in Training and Students are represented through separately seated sections of the House of Delegates and shall not be included in the member count/ratio of representation of OSMA districts for purposes of determining representation in the House of Delegates.

From forty-five (45) days up to the opening of the Annual Meeting of the House of Delegates, in case a district Delegate or Alternate Delegate is unable to serve, the District Councilor representing that district may at any time certify to the Chair of the Committee on Credentials the name of an Active OR RETIRED OSMA Member who resides or works within the district to serve in the place of such absent Delegate or absent Alternate Delegate. The Committee on Credentials shall rule on the eligibility of such certified individual or individuals to act in the place of such absent Delegate or Alternate Delegate.

**SECTION 3. OHIO COUNTY DELEGATES.** EACH OHIO COUNTY WILL BE ENTITLED TO ONE (1) DELEGATE AND ONE (1) ALTERNATE DELEGATE IN THE HOUSE OF DELEGATES PROVIDED THAT COUNTY HAS ACTIVE OR RETIRED MEMBERS OF THE ASSOCIATION WORKING OR RESIDING WITHIN IT.

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867 868 869 870	SHALL SUBM	AN ACTIVE MEDICAL SOCIETY WITHIN THE COUNTY, THAT SOCIETY IIT THE NAME OF THE DELEGATE AND ALTERNATE DELEGATE TO THE N PRIOR TO THE OPENING OF THE HOUSE OF DELEGATES.
871 872 873 874 875 876	DISTRICT CO FROM ACTIV DISTRICT CO	AL SOCIETY EXISTS WITHIN THE COUNTY, THE CORRESPONDING OSMA DUNCILOR IN WHICH THE COUNTY IS LISTED SHALL SOLICIT VOLUNTEERS E OR RETIRED MEMBERS WHO LIVE OR WORK WITHIN THE COUNTY. THE DUNCILOR SHALL SUBMIT THE NAMES OF THESE DELEGATES AND DELEGATES TO THE ASSOCIATION PRIOR TO THE OPENING OF THE IELEGATES.
877 878	Fiscal note:	\$500 (Sponsor) \$500 (Staff)
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Resolution 03-2021 - ADOPT 881 OSMA elections 882 883 884 COMMENTS: The open hearing discussion supported the adoption of this resolution. The Committee recommends adoption. 885 886 887 Preliminary comments: The Committee discussed the proposed changes and agreed 888 with the changes made by the Bylaws Committee. The Committee recommends adoption. 889 890 **RESOLVED**, That the OSMA Constitution and Bylaws be amended as follows (showing 891 only sections affected): 892 **BYLAWS** 893 **CHAPTER 4** 894 THE HOUSE OF DELEGATES 895 896 Section 9. Committees of the House of Delegates. For the purpose of expediting proceedings, the President shall appoint from the roster of Delegates the following committees: 897 898 Committees on Resolutions, to which shall be referred all resolutions; Committee on Credentials; and other committees considered necessary by the President. The President shall 899 appoint a Committee on Tellers and Judges of Election from those members present at the 900 901 **Annual Meeting** 902 903 **CHAPTER 5** 904 NOMINATION AND ELECTION OF OFFICERS 905 Section 1. Committee on Nominations. The Committee on Nominations shall consist of 906 eight members including the OSMA President, the OSMA President-Elect and six additional 907 members appointed by the OSMA President and approved by the Council. The President shall appoint the chair of the Committee. The President and President-Elect serve on the 908 909 Committee on Nominations during his or her term of office. Other committee members shall 910 serve not more than one, three-year term with two new members rotating on each year. 911 The Committee on Nominations shall submit a report to the House of Delegates containing 912 the name of one (1) or more members for each of the offices to be filled at that Annual 913 Meeting. For those elections which require a nomination by the committee, each nominee must have a majority vote of the Committee in order to be placed on the report for 914 presentation to the House of Delegates except the nominees for President-Elect and those 915 916 from the Organized Medical Staff Section, the Resident and Fellows Section, the Medical Student Section and the Young Physician Section. 917 All nominees shall meet qualifications set forth in the OSMA bylaws. Additionally, the 918 919 Committee on Nominations shall determine candidate selection criteria for at-large Council positions that may include, but are not limited to, diversity, experience, engagement with 920 organized medicine, experience with strategic planning, physician practice demographics, 921 922 physician practice settings, current organizational needs, House of Delegates input, OSMA 923 staff input and individual physician self-selection. The precise selection criteria may vary year

- to year to reflect the current needs of the OSMA. The Committee on Nominations makes the
- final determination about the selection criteria it will use in any given year and shall inform the
- 926 membership of the selection criteria used. The Committee on Nominations shall also determine
- 927 how best to solicit candidates.
- The six at-large council seats shall be elected BY VOTING MEMBERS in annual statewide direct
- 929 elections. Each year the committee on nominations shall nominate at least three candidates for
- 930 the at-large seats to be filled; however, not more than two at-large councilors can reside or
- 931 practice in the same councilor geographic district. The nominating committee shall report to all
- 932 OSMA voting members the slate of candidates for at-large councilor elections.
- 933 OSMA DISTRICT COUNCILORS SHALL BE ELECTED BY VOTING MEMBERS IN DISTRICT-
- 934 WIDE DIRECT ELECTIONS.
- 935 THE President-Elect, Secretary-Treasurer, and delegates and alternate delegates to the
- American Medical Association shall be elected by the House of Delegates.
- 937 Section 2. COMMITTEE ON ELECTIONS. THE COMMITTEE ON ELECTIONS SHALL
- 938 CONSIST OF A CHAIR AND VICE-CHAIR WHO SHALL SERVE TWO-YEAR TERMS AND BE
- 939 SELECTED FROM AMONG THE DELEGATES TO THE OSMA HOUSE OF DELEGATES.
- 940 THE OSMA PRESIDENT SHALL ANNUALLY APPOINT THE VICE-CHAIR WHO SHALL
- 941 AUTOMATICALLY BECOME CHAIR AFTER THE FIRST YEAR OF THE TWO YEAR TERM;
- 942 EXCEPT THAT FOR THE INITIAL YEAR OF THE COMMITTEE (2021-2022), THE
- 943 PRESIDENT SHALL APPOINT THE CHAIR WHO SHALL SERVE A ONE YEAR TERM. THE
- 944 COMMITTEE ON ELECTIONS SHALL SERVE YEAR ROUND AND SUPERVISE ALL
- 945 ASPECTS OF OSMA ELECTIONS. THE COMMITTEE SHALL CONDUCT ELECTIONS,
- 946 INCLUDING HOUSE OF DELEGATES ELECTIONS AND STATEWIDE OR DISTRICT-WIDE
- 947 ELECTRONIC ELECTIONS, AND CERTIFY THE FINAL VOTE COUNTS. THE COMMITTEE
- 948 SHALL APPOINT TELLERS AS NEEDED FROM AMONG THE DELEGATES OR ALTERNATE
- 949 DELEGATES AT THE ANNUAL HOUSE OF DELEGATES TO ASSIST WITH COUNTING
- 950 VOTES AT THE MEETING.

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**Section 8. Removal from Office.** Any officer of this Association, or any Delegate to the American Medical Association, or any Alternate Delegate to the American Medical Association, may be removed from office, for cause, at any time.

Proceedings for the removal from office of an officer of this Association or any Delegate or Alternate Delegate to the American Medical Association shall be commenced by the filing with the Chief Executive Officer of this Association a written complaint signed by not less than sixty (60) Delegates to the House of Delegates of this Association from at least thirty (30) Component Societies TWO DISTRICTS. Such complaint shall name the person sought to be removed, shall state the cause for removal, and shall demand that a meeting of the House of Delegates be held for the purpose of conducting a hearing on the charges set forth in the complaint, and for the purpose of selecting an individual to fill the office which may be vacated by reason of the removal from office of the person sought to be removed.

Within ten (10) days after the filing of such complaint, the Chief Executive Officer shall serve upon the person named in the complaint a true and correct copy of it, together with a written notice specifying the time and place of hearing the charges set forth in the complaint. The Chief Executive Officer shall also mail a copy of the complaint and notice to each Delegate

to the House of Delegates of this Association. Service upon the person named in the complaint of a copy of the complaint together with such written notice shall be made by delivering the same personally to the person or by sending the same by certified mail addressed to the person at his/her usual place of residence.

At the hearing upon such charges the person named in the complaint shall be afforded full opportunity to be heard in his/her own defense, to be represented by legal counsel or any other person of his/her own choosing, to cross-examine the witnesses who testify against him/her, and to examine witnesses and offer evidence in his/her own behalf. The House of Delegates shall convene for the purposes of hearing the charges in such complaint, and electing a successor if need be:

- (a) on any date during the Annual Meeting of the House of Delegates, provided the date of such Annual Meeting is more than thirty (30) and less than sixty (60) days subsequent to the date of the service of such written notice upon the person sought to be removed; or
- (b) at a special meeting called for the purpose of hearing the charges set forth in such complaint. Such special meeting shall be held on a date more than thirty (30) and less than sixty (60) days subsequent to the date of the service of the written notice upon such person sought to be removed.

A quorum for the purposes of this section shall consist of two-thirds (2/3) of the elected Delegates.

If two-thirds (2/3) of the Delegates of the House of Delegates present and voting by secret ballot vote affirmatively to remove such person from office, such person shall be declared removed from office.

A successor to an office in which a vacancy has been created as a result of the removal from office of any such officer, Delegate or Alternate Delegate shall be elected to serve the balance of the term of such office. All nominations for the office shall be made from the floor. The election of a successor officer, Delegate or Alternate Delegate shall be by a majority of the Delegates present and voting and shall be in accordance with Section 5 of Chapter 5 of the Bylaws of this Association, and with respect to a successor Delegate or Alternate Delegate to the American Medical Association such election shall also be in accordance with Section 5 of Chapter 5 of the Bylaws of this Association.

Fiscal Note: \$500 (Sponsor)

1000 \$ 500 (Staff)

1004 1005	Resolution 04-2021 - ADOPT Constitution and Bylaws changes – membership category updates
1006 1007 1008	COMMENTS: The open hearing discussion supported the adoption of this resolution. The Committee recommends adoption.
1009 1010 1011 1012 1013 1014 1015	Preliminary comments: The Committee discussed the proposed changes and reviewed the comments made online. Seeing no concerns with the proposed changes, the Committee agreed with the changes proposed by the Bylaws Committee and recommends adoption.
1013 1016 1017	<b>RESOLVED</b> , That the OSMA Constitution and Bylaws be amended to read as follows (showing only sections affected):
1018 1019	ARTICLE III COMPOSITION OF THIS ASSOCIATION
1020 1021 1022 1023 1024 1025	Classes of Members. THERE ARE TWO CLASSES OF MEMBERSHIP: GENERAL AND AFFILIATE. THESE CLASSES, IN ADDITION TO THEIR ASSOCIATED MEMBERSHIP RIGHTS AND PRIVILEGES, ARE FURTHER DEFINED IN CHAPTERS 1 AND 2 OF THE BYLAWS. The voting members of this Association shall consist of the following classes of members IN THE FOLLOWING CLASSES OF GENERAL MEMBERSHIP who have paid the appropriate dues amounts, if any, to the association by January 31 of each year.
1026	
1027	1. Active Members
1028	2. Retired Members
1029	3. Members in Training
1030	4. Military Members
1031	4. Student Members
1032 1033 1034 1035	Non-voting members of this association shall consist of the following classes of members who have paid the appropriate dues amounts, if any, to the association by January 31 of each year: non-resident members; honorary members; affiliate members; associate members.
1036	
1037	BYLAWS
1038 1039	CHAPTER 1 GENERAL MEMBERSHIP
1040 1041	Section 1. Rights of GENERAL Members. All GENERAL members of this Association shall have the right to attend all meetings of this Association.
1042	Section 2. Classification of Membership.

(a) Active Members. The Active Members of this Association are those physicians with the OSMA who practice, work or reside in Ohio and who pay the appropriate dues to this association by January 31 of each year. Active Members shall have the right to vote and hold office

 **(b) Retired Members.** Retired Members of this Association shall be those members of this Association who have retired from the active practice of medicine and who do not receive regular and significant income for their participation in any professional activity related to the practice of medicine. They must have been Members of this Association for ten (10) years prior to retirement. Retired Members shall have the right to vote and hold office.

**(c) Members in Training.** Members in Training shall comprise all physicians who are pursuing studies and training in a program accredited by the Accreditation Council for Graduate Medical Education (ACGME), the American Medical Association or the American Osteopathic Association and their associated groups and who are approved for membership by the Council. Members in Training shall comprise the Resident and Fellows Section and shall have the right to vote and hold office.

(d) Nonresident Members. Nonresident Members shall include those physicians who reside and practice outside Ohio but who hold a license to practice medicine and surgery in Ohio or any other state and who are approved for Nonresident Membership by the Council. NONRESIDENT MEMBERS SHALL NOT HAVE THE RIGHT TO VOTE OR HOLD OFFICE.

**(e) Honorary Members.** The House of Delegates may elect as an Honorary Member any person distinguished for services or attainments in medicine or the allied sciences or who has rendered other services of unusual value to medicine. An Honorary Member shall pay no dues or assessments. HONORARY MEMBERS SHALL NOT HAVE THE RIGHT TO VOTE OR HOLD OFFICE.

(f) Military Members. Military Members comprise all those Active Members of this Association who are serving a limited tour of active duty with the Armed Services of the United States.

(g) Life Active Members. Individuals who currently are Life Active Members having made a single payment for lifetime membership dues will continue as Life Active Members, but no new life memberships will be permitted. Life Active Members will have all of the rights and privileges of an Active Member under these Bylaws for life. Wherever the term "Active Member" is used in these Bylaws it shall include Life Active Members.

(h) Affiliate Members. Executives of the Ohio State Medical Association, county medical societies in Ohio, and other medical organizations in Ohio and specialty societies in Ohio with three (3) years or more experience in the sponsoring organization or individuals recommended by a county medical society in Ohio, medical specialty society in Ohio, or physician representative organization in Ohio, are eligible for Affiliate Membership in the Ohio State Medical Association. Such Affiliate Membership shall be at the discretion of the Council.

- (i) Student Members. Student Members of this Association shall comprise those students who are pursuing the diploma of Doctor of Medicine or Doctor of Osteopathy in an approved medical or osteopathic college or institution in the State of Ohio and are approved for Student Membership by the Council. Student Members shall comprise the medical group known as the Medical Student Section. Said section shall be governed by and operate under separate Bylaws approved by the Council. Except as otherwise provided in Article VII of the Constitution, Student Members of this Association shall have the right to vote and hold office in this Association.
- (j) Associate Members. Non-physician administrators and managers of medical practices are eligible for Associate Membership. Associate Members of the Ohio State Medical Association may attend all meetings of the Association, but shall not have the right to make a motion, vote or hold office in this Association.

#### Section 3. Eligibility FOR GENERAL MEMBERSHIP.

To be eligible for any class of GENERAL membership other than honorary, affiliate, associate, retired, or student in this Association, a person must hold a limited, temporary, or unlimited certificate to practice medicine and surgery, or osteopathic medicine and surgery, issued by the licensing authority of the State of Ohio, which license must be in full force and effect.

1110 CHAPTER 2 1111 AFFILIATE MEMBERSHIP

**SECTION 1. RIGHTS OF AFFILIATE MEMBERSHIP.** THE RIGHTS OF AFFILIATE MEMBERS ARE DELINEATED BY CLASS OF AFFILIATE MEMBERSHIP AS DELINEATED BELOW.

#### SECTION 2. CLASSIFICATION OF AFFILIATE MEMBERSHIP

- (a) AFFILIATE EXECUTIVE MEMBERS. NONPHYSICIAN EXECUTIVES OF THE OHIO STATE MEDICAL ASSOCIATION, COUNTY MEDICAL SOCIETIES IN OHIO, AND OTHER MEDICAL ORGANIZATIONS IN OHIO AND SPECIALTY SOCIETIES IN OHIO ARE ELIGIBLE TO BE AFFILIATE EXECUTIVE MEMBERS OF THE OHIO STATE MEDICAL ASSOCIATION WITH APPROVAL BY THE COUNCIL. SUCH AFFILIATE EXECUTIVE MEMBERS MAY ATTEND THE MEETINGS OF THE ASSOCIATION BUT SHALL NOT HAVE THE RIGHT TO MAKE A MOTION, VOTE OR HOLD OFFICE IN THE ASSOCIATION.
- (b) AFFILIATE ADMINISTRATIVE MEMBERS. NON-PHYSICIAN ADMINISTRATORS AND MANAGERS OF MEDICAL PRACTICES OF PHYSICIANS WHO ARE CURRENT ACTIVE MEMBERS OF THE ORGANIZATION ARE ELIGIBLE TO BE AFFILIATE ADMINISTRATIVE MEMBERS OF THE OHIO STATE MEDICAL ASSOCIATION. AFFILIATE ADMINISTRATIVE MEMBERS OF THE OHIO STATE MEDICAL ASSOCIATION MAY ATTEND ALL MEETINGS OF THE ASSOCIATION, BUT SHALL NOT HAVE THE RIGHT TO MAKE A MOTION, VOTE OR HOLD OFFICE IN THE ASSOCIATION.

1132	(c)	AFFILIATE ORGANIZATION MEMBERS: MEMBERS OF OHIO	
1133	ORGA	NIZATIONS MAY BECOME AFFILIATE ORGANIZATION MEMBERS OF THE	
1134	OHIO	STATE MEDICAL ASSOCIATION WITH APPROVAL BY THE COUNCIL, WITH A	
1135	SIGNE	ED AFFILIATE AGREEMENT AND AFTER PAYMENT OF APPROPRIATE FEES.	
1136	AFFILIATE ORGANIZATION MEMBERS MAY PARTICIPATE IN PRODUCTS AND		
1137	SERVICES OF THE ASSOCIATION AS DELINEATED IN THE AFFILIATE		
1138	AGRE	EMENT. AFFILIATE ORGANIZATION MEMBERS SHALL NOT HAVE THE	
1139	RIGH	Γ TO MAKE A MOTION, VOTE, HOLD OFFICE, ATTEND MEETINGS, OR	
1140	REPR	ESENT THE OHIO STATE MEDICAL ASSOCIATION TO OUTSIDE ENTITIES.	
1141	Fiscal Note:	\$500 (Sponsor)	
1142		\$500 (Staff)	
		+ · · · · · · · · · · · · · · · · ·	
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1145			

1146 1147 1148	Resolution 05-2021 - AMEND Ohio Telehealth (VIDEO/AUDIO OR AUDIO-ONLY)		
1149 1150 1151 1152 1153 1154	COMMENTS: There was some concern about reimbursement mentioned during the open hearing and comments about the need to be compensated for the time it takes to utilize the technology involved in telehealth visits. The Committee amended the resolution's title and body to reflect that telehealth encompasses both video/audio and audio-only encounters and should be reimbursed equally to in-person visits.		
1155 1156 1157		its: The Committee discussed the proposed resolution and amended hat the OSMA would support telehealth advances and initiatives.	
1158 1159 1160	telehealth (VIDEO/AU	Our OSMA will continue to advocate for the widespread adoption of DIO OR AUDIO-ONLY) services in the practice of medicine for physicians ms post SARS-COV-2; and, <b>be it further</b>	
1161 1162 1163 1164 1165	(VIDEO/AUDIO OR A populations and complanning for telehealt	Our OSMA will advocate for SUPPORT equitable access to telehealth UDIO-ONLY) services, especially for at-risk and under-resourced patient nunities, including but not limited to supporting increased funding and infrastructure such as broadband and internet-connected devices for es and patients; and, be it further	
1166 1167 1168 1169	public and private ins ONLY) comparable E	Our OSMA will advocate for SUPPORT telehealth parity laws that require urers to cover telehealth-provided services (VIDEO/AUDIO OR AUDIO-QUIVALENT to that of in-person services, and not limit coverage only to select corporate telehealth providers; and, be it further	
1170 1171 1172	effective methods for	Our OSMA will encourage appropriate stakeholders to study the most the instruction of medical students, residents, fellows and practicing of telehealth and its capabilities and limitations; and, <b>be it further</b>	
1173 1174 1175	•	Our OSMA will consider model legislation provided by the AMA's Center in its ongoing legislative advocacy efforts regarding Telehealth in	
1176 1177	Fiscal Note:	\$ (Sponsor) \$ 75,000 (Staff)	
1178 1179 1180			

# 1181 Resolution 06-2021 – AMEND 1182 Improving Patient Care through Better Communication of Availability of Physician 1183 Specialists at Hospitals 1184 COMMENTS: There was a considerable amount of testimony presented. The Committee 1185 discussed the amendments suggested by those providing testimony. The Committee 1186 supports the concepts presented and understands the challenges the resolution is 1187 attempting to resolve. Given the debate within our own HOD regarding this complex

Preliminary comments: The Committee discussed the proposed resolution and questioned how the OSMA would accomplish changing the health system processes addressed. The Committee felt that this is an important issue that needs to be addressed but felt that the proposed language does not adequately address the issue and felt that Council should investigate this issue further. The Committee noted that this issue may be more appropriately addressed by the Ohio Hospital Association and may require legal/regulatory changes.

issues, we felt further progress at the state level is necessary prior to taking this policy

to the AMA. Therefore, the Committee recommends removing the last resolved. The

Committee recommends adoption of the resolution as amended.

 **RESOLVED**, that information about what physician specialists are available at each hospital in a community should be readily available through communication between hospital systems, and **be it further** 

**RESOLVED**, that in patient care situations which require a specialist that is not available at the hospital where the patient is initially seen but is available at a competing ANOTHER hospital in the same region, arrangements should be made for transfer to the closest and/OR most appropriate specialist, per the treating physician's judgment, so that the patient receives timely care, and **be it further** 

**RESOLVED**, That our OSMA work with the Ohio Hospital Association, county medical societies and member physicians to improve communication among physicians and between hospitals, especially in communities with 2 or more competing hospital systems with employed physicians; and, be it further

**RESOLVED**, That our OSMA's Delegation to our AMA take this resolution on improving patient care through better communication of availability of physician specialists to the AMA Annual Meeting for further discussion and action.

Resolution 07-2021 - REFER 1218 Protection of Informed Consent and Patient Autonomy with Administration of COVID-19 1219 1220 **Vaccinations** 1221 COMMENTS: The Committee noted that there was significant testimony given. The 1222 1223 majority of the testimony was against adopting the resolution as written. Most of the 1224 testimony only supported the first Resolved. The issue is complex and the Committee 1225 felt that referring the resolution to Council was the most appropriate recommendation. The Committee was concerned that the resolution, as currently worded, could be 1226 1227 misconstrued or misinterpreted. 1228 1229 Preliminary comments: The Committee discussed the resolution and noted that the 1230 majority of the online testimony was opposed to this resolution. While the Committee appreciates the author's intent to bring this issue to light and the need for more science-1231 1232 based research on this topic, the Committee decided to not recommend adoption of this 1233 resolution. 1234 RESOLVED, That the Ohio State Medical Association (OSMA) strongly encourage 1235 protection of patient autonomy and informed consent with respect to COVID-19 vaccinations, 1236 1237 and advocate that patients should not be discriminated against if they elect not to receive the 1238 COVID-19 vaccine for any reason; and, be it further 1239 1240 **RESOLVED**, That the OSMA advocate through governmental lobbying efforts that the COVID-19 vaccine should be NOT be mandated by governmental order or law to restrict travel 1241 or participation in organized events, and or discriminate the patient from exercising their rights 1242 as a citizen; and, be it further 1243 1244 1245 **RESOLVED,** That OSMA AMA Delegation take this resolution to the AMA for consideration. 1246 1247

> \$ 25,000 (Sponsor) \$ 25,000 (Staff)

1248

Fiscal Note:

Resolution 08-2021 - NOT ADOPT 1253 **COVID-19 Vaccine Distribution** 1254 1255 1256 COMMENTS: The Committee felt that Resolution 8 and 9 were very similar. The Committee decided to recommend that 8 not be adopted and that some concepts 1257 proposed in Resolution 8 be included in Resolution 9. 1258 1259 1260 RESOLVED, That our OSMA urgently lobby the Ohio Department of Health, the Governor of Ohio, and our State Legislature, to direct the Ohio Department of Health to include 1261 those Primary Care Physicians' offices, who wish to deliver vaccines to their patients, the 1262 opportunity of Covid19 vaccine distribution from the state's weekly allotment, so as to 1263 1264 immediately vaccinate a larger portion of our most vulnerable population, who have, thus far, 1265 been denied the opportunity to be vaccinated; and, be it further 1266 1267 **RESOLVED.** That in the plans of Ohio for future pandemics, that our OSMA work to include Primary Care Physicians' offices as initial sites of vaccine distribution to help insure 1268 better delivery of vaccines to those most in need. 1269 1270 Fiscal Note: \$ 500 (Sponsor) 1271 \$ 500 (Staff) 1272 1273 1274

## Resolution 09-2021 – AMEND COVID-19 Vaccination Protocol PANDEMIC PREPAREDNESS

COMMENTS: There was considerable testimony in support of the amendments recommended by the Committee. Testimony supported adding MD/DO after the word "physician" to clarify that this applies to medical doctors licensed by the State Medical Board of Ohio. The author suggested a title change and the Committee agreed that the change is appropriate.

Preliminary comments: The Committee discussed both resolutions 8 and 9 at length and agreed with the intent of each. The Committee suggests adoption of the resolution that has been amended to reflect that the State of Ohio should recognize that physicians should be a central part of the administration of vaccines.

**RESOLVED**, THE OSMA RECOMMENDS THAT The State of Ohio will-establish a standing board headed by—TO continuously review pandemic preparedness including, but not limited to, stockpiles of personal protective equipment, plans for isolation protocols, mobilization of testing, and immunization procedures, AND ENSURE THAT PHYSICIANS (MD/DO) ARE CENTRAL TO THE ADMINISTRATION OF VACCINATIONS TO THE CITIZENS OF OHIO. THIS BOARD SHOULD INCLUDE the Ohio State Medical Association, and including the Ohio State Board of Pharmacy, the Ohio Hospital Association, and the Ohio Department of Health, AND OTHER INTERESTED PARTIES.; and, be it further

**RESOLVED**, This board would continuously review pandemic preparedness including, but not limited to, stockpiles of personal protective equipment, plans for isolation protocols, mobilization of testing, and immunization procedures; and, **be it further** 

**RESOLVED**, This board would ensure that primary care physicians are central to the distribution of vaccinations to the citizens of Ohio.

**Fiscal Note:** \$ 25,000 – 500,000 (Sponsor) \$ 75,000 (Staff)

1311		Resolution 10-2021 - AMEND	
1312	Physician Communications in the Media		
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1314		thor proposed amending the resolution by adopting AMA Ethical	
1315		Il Physician Conduct in the Media accessible here. The Committee	
1316	•	nor's suggestion and recommends adoption of the resolution as	
1317	amended.		
1318			
1319		nts: The Committee discussed this resolution and the comments that	
1320		e. The Committee noted that the AMA already has policies (H-	
1321		1-440.830) that address many of these issues and mentioned that the	
1322		emoving the third resolved. The Committee decided to not	
1323	recommend adoption	n of the resolution.	
1324			
1325	•	the policy of our Ohio State Medical Association that all physicians,	
1326	. ,	mbers, communicate standard of care, accurate, science-based	
1327	information when spe	paking or writing in the lay press or social media;	
1328	and, be it furt	<del>:her</del>	
1329	,		
1330	RESOLVED.	Resolved that all discussions by physicians of medical and scientific	
1331		timate differences of opinion should be done in proper scientific and	
1332	medical forums, not in the lay press or social media; and, be it further		
1333			
1334	RESOLVED,	Resolved that our Ohio Delegation to the AMA take this issue of physician	
1335	communications in the media to the AMA Annual Meeting of the House of Delegates for further		
1336	discussion THE OSMA ADOPT AS POLICY, AMA CODE OF MEDICAL ETHICS OPINION		
1337	8.1.2 ETHICAL PHYS	SICIAN CONDUCT IN THE MEDIA.	
1338			
1339	Fiscal Note:	\$500 (Sponsor)	
1340		\$500 (Staff)	
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Resolution 11-2021 - NOT ADOPT 1344 Creating OSMA Resources/Programming to Address Physicians' Role in Medical 1345 Misinformation 1346 1347 COMMENTS: Testimony did not support adoption of this resolution. The Committee 1348 recommends that this resolution is not adopted. 1349 1350 1351 Preliminary comments: The Committee discussed the resolution and felt that, similar to Resolution 10-2021, the AMA already has policy on these issues and educational 1352 1353 materials supporting those policies. The OSMA actively partners with state entities, specialty societies, the AMA, and other parties to assist physicians with locating 1354 1355 accurate medical information and educational opportunities. 1356 **RESOLVED.** That the OSMA create resources for Ohio physicians centered on avoiding 1357 spread of medical misinformation on social media, and addressing medical misinformation; and, 1358 be it further 1359 1360 **RESOLVED**, That the OSMA disseminate the aforementioned resources to Ohio 1361 1362 hospitals, its members, and its website. 1363 **Fiscal Note:** 1364 \$ (Sponsor) \$ 10,000 (Staff) 1365 1366 1367 1368

Resolution 12-2021 - AMEND 1369 OSMA to Create an IMG (International Medical Graduate) Section 1370 1371 1372 COMMENTS: There were no new comments offered at the open hearing. The Committee recommends adopting the resolution as amended. 1373 1374 1375 Preliminary comments: The Committee discussed this resolution and the comments that 1376 were provided online and noted that the majority of the comments were supportive of this resolution. The Committee noted that this resolution was modeled on the AMA 1377 sections model that includes International Medical Graduates (IMG). The Committee 1378 1379 understands that adopting this resolution would require a bylaws change and suggests 1380 adopting the resolution so the OSMA Bylaws Committee can begin drafting changes to 1381 the bylaws to include this section. It is the Committee's understanding that the bylaw changes will be presented to the HOD at the 2022 meeting for a vote. 1382 1383 1384 **RESOLVED**, That the Ohio State Medical Association will create a separate International Medical Graduate (IMG) Section. with the following guidelines: 1385 1386 1 The IMG section will create its own Independent Operating Plan and Bylaws to be approved 1387 1388 by OSMA Council; 1389 2. The OSMA Council will evaluate the existence of the OSMA IMG section every 5 years; 1390 1391 1392 3. The OSMA IMG section will be eligible to have one Delegate and One Alternate Delegate for every 100 IMG members who are also OSMA voting members, to be selected in accordance 1393 with the Bylaws of the IMG Section approved by the OSMA Council; and 1394 1395 1396 4) The OSMA shall maintain the designated IMG representative seat on the OSMAPAC Board. 1397 Fiscal Note: \$ 10,000 (Sponsor) 1398 1399 \$ 10,000 (Staff) 1400 1401 1402

Resolution 13 – 2021 – REFER
Advocate for the Creation of Scholarships, Reducing o

Advocate for the Creation of Scholarships, Reducing of Tuition and Waiving of Application Fees to Underrepresented Students in Medicine

COMMENTS: There was some testimony in support of the 2nd, 3rd and 4th resolveds. There was some concern about adopting the 1st resolved. The Committee recommends referral of the resolution in order to create consistent and cohesive policy.

 Preliminary comments: The Committee discussed this resolution and the comments that were provided online. The Committee agrees that this is an important issue. The Committee supports working with medical school programs to encourage the reduction of application fees. The Committee feels it is also important to address the need for "needs testing" for underrepresented groups who are seeking financial assistance. The Committee suggests referral to Council to further study this issue and, among other issues, clarify the types of underrepresented groups this would apply to and what OSMA entity would fund the scholarship fund.

**RESOLVED,** That our OSMA recognize Black, Indigenous and Hispanic medical students as underrepresented minorities in medicine, understanding that moving forward other groups than those previously listed can be underrepresented, while also recognizing that race and ethnicity are only two aspects of providers that are considered to be underrepresented in the medical field; and, **be it further** 

**RESOLVED**, That Our OSMA support reduced application fees for medical school and medical school pipeline programs to foster an increase in students from underrepresented backgrounds, racial and ethnic groups entering the medical field; and, **be it further** 

**RESOLVED**, That Our OSMA advocate for the creation of state-funded scholarships specifically meant for medical students from traditionally underrepresented groups in medicine; and, **be it further** 

**RESOLVED,** That our OSMA aim to create a scholarship fund for Ohio medical students from underrepresented groups in medicine.

Fiscal Note: \$ (Sponsor) \$ 25,000 (Staff)

Members of the House, this concludes the report of Resolutions Committee 1. I would like to thank all the members of Resolutions Committee 1 for their excellent cooperation and help they have given me. On behalf of the Committee I would like to thank all who offered testimony. I would also like to thank Jennifer Hayhurst and Mary Whitacre for their excellent staff assistance, and to Nancy Gillette for legal review.

Respectfully submitted, Tyler Campbell, MD, Chair