2023 Action Report on 2022 Resolutions

2022 OSMA Policy Sunset Report

Action: The OSMA Policy Compendium is updated with the recommendations in the 2022 Policy Sunset Report.

Resolution 01 – 2022 - Create Guidelines for Sections and Create an International Medical Graduate Section

Action: The updated OSMA Constitution and Bylaws are posted on the OSMA website.

Resolution 02-2022 – Change the Ratio of Representation for Medical Specialties in the House of Delegates

Action: The updated OSMA Constitution and Bylaws are posted on the OSMA website.

Resolution 03-2022 – Meeting Code of Conduct

Action: The adopted Meeting Code of Conduct is incorporated into the HOD, Council and other OSMA governance documents and is posted in the policy compendium online.

Resolution 04-2022 – Establish an Ohio State Medical Association Women Physicians Section

RESOLVED, that our OSMA form a section of the OSMA known as the OSMA Women Physicians Section; and, **be it further**

RESOLVED, that appropriate Bylaws changes be accomplished to establish the OSMA Women Physicians Section.

Action: Draft bylaws were approved in a Council resolution in October to be submitted as a resolution from Council at 2023 meeting.

Resolution 05-2022 - Establish an Ohio State Medical Association Senior Physician Section

RESOLVED, that our OSMA form a Section of the OSMA known as the OSMA Senior Physicians Section, to include all members age 65 and above, either active or retired; and, **be it further**

RESOLVED, that appropriate Bylaws changes to establish the Senior Physicians Section be accomplished.

Action: Draft bylaws were approved in a Council resolution in October to be submitted as a resolution from Council at 2023 meeting.

Resolution 06-2022 – OSMA Focused Task Force on Pandemic Preparedness and Response

RESOLVED, that the OSMA will create the Focused Task Force (FTF) on Pandemic Preparedness and Response to ensure that the organization is prepared to collaborate with other public and private bodies on the preparedness for and response to potential future pandemics; and, **be it further**

RESOLVED, that the Focused Task Force (FTF) on Pandemic Preparedness and Response shall, be appointed by the OSMA President to include OSMA members from a variety of specialties and geographic areas of the state, but with a majority of the FTF members being those with special expertise in immunology/infectious diseases, public health, emergency medicine, critical care, primary care, those caring for vulnerable populations (as defined by federal regulations), emergency preparedness, public policy and other areas of emphasis critical to the assessment and implementation of pandemic preparedness and response initiatives; and, **be it further**

RESOLVED, that the Focused Task Force (FTF) on Pandemic Preparedness and Response may invite non-OSMA member physicians and non-physicians with special expertise in pandemic preparedness and response to attend as non-voting participants in FTF meetings at the discretion of the FTF Chair; and, **be it further**

RESOLVED, that the Focused Task Force (FTF) on Pandemic Preparedness and Response may provide recommendations to the OSMA Council and the OSMA House of Delegates regarding the following issues:

- 1. Changes to local, state and federal public health measures to effectively prevent or reduce the impact of potential future pandemics
- Changes to state or federal laws, regulations, administrative rules, and accreditation/certification standards to improve local, state or federal preparedness for and response to potential future pandemics
- Changes to state or federal laws, regulations, administrative rules, and accreditation/certification standards to improve the ability of physicians, hospitals, and other healthcare entities to prepare for and maintain safe, high-quality, patient-centered, accessible, and equitable clinical practice/clinical operations during potential future pandemics
- 4. Local, regional and statewide efforts to improve the collaboration and coordination of clinical care in ambulatory, outpatient, inpatient, post-acute and other congregate care settings with regard to hospital capacity, nursing facility capacity, vaccination, prevention, and treatment of pandemic-related illnesses
- Local, regional and statewide efforts to coordinate public and private entities to maintain the effective and equitable distribution of medical supplies, medications, and other scarce medical resources during potential future pandemics
- 6. Creation of effective networks and systems for the dissemination of accurate, evidencebased information related to preparedness for and response to potential future

pandemics for physician practices, medical staffs, hospitals, nursing facilities, medical schools and GME training programs as well as the general public

- 7. Enhancements to CME programs related to pandemic preparedness and response
- 8. Programs to effectively provide professional and behavioral health support for physicians and other frontline healthcare personnel during potential future pandemics
- 9. Changes in the OSMA constitution, bylaws, policies and procedures to effectively maintain the operations of the organization during potential future pandemics

Action: Task Force was appointed by Dr. Santin and met one time at the end of 2022 and will meet again in February 2023.

Resolution 07-2022- Addressing the Roles of Licensed Health Professionals in Preventing Public Health Misinformation

RESOLVED, that our OSMA oppose legislation that mandates licensed healthcare professionals provide non-evidence-based healthcare information to patients; and, **be it further**

RESOLVED, that our OSMA: 1) Will continue to support the dissemination of accurate medical and public health information by public health organizations and health policy experts; and 2) will work with public health agencies and professional societies in an effort to establish relationships with journalists and news agencies to enhance the public reach in disseminating accurate medical and public health information and address misinformation that undermines public health initiatives.

Action: (First Resolve) Self-executing

(Second Resolve) The Government Relations team continues to monitor new information as it arises and work/engage with public health agencies and journalists. Based on feedback in the strategic plan, communications team will be creating opportunities for members to help combat misinformation in their own communications.

Resolution 08-2022 - Supporting Research into the Neurological and Psychological Effects of SARS-CoV-2 and the Covid-19 Pandemic

RESOLVED, our Ohio State Medical Association supports efforts to address the need for research into the neurological and psychological effects of SARS-CoV-2 infection and the Covid-19 pandemic overall.

Action: Self-executing

Resolution 09-2022 – Access to Standard Care for Nonviable Pregnancy

RESOLVED, the Ohio State Medical Association (OSMA) supports patients' timely access to standard treatment of nonviable pregnancy, including but not limited to miscarriage,

molar pregnancy, and ectopic pregnancy, in both emergent and non-emergent circumstances; and, **be it further**

RESOLVED, the OSMA opposes any hospital directive, policy, or legislation that may hinder patients' timely access to the accepted standard of care in both emergent and non-emergent cases of nonviable pregnancy.

Action: Self-executing

Resolution 10-2022 - Enhancing Education and Eliminating Inequitable Time Constraints for Contraceptive Sterilization Procedures

RESOLVED, our OSMA supports the sufficient education of physicians involved in prenatal care, obstetrics, and family planning on current Medicaid policy; and, **be it further**

RESOLVED, our OSMA encourages physicians to spend sufficient time educating and counseling patients on the Consent to Sterilization form, necessary steps for its completion, and the implications of contraceptive sterilization procedures; and, **be it further**

RESOLVED, our OSMA supports the elimination of inequitable time constraints for consent for contraceptive sterilization procedures.

Action: Self-executing

Resolution 11-2022 – Addressing Weight Stigma among Healthcare Workers

RESOLVED, our Ohio State Medical Association (OSMA) supports health promotion techniques that center around healthy behavior and lifestyle modifications rather than weight reduction alone; and, **be it further**

RESOLVED, Our OSMA supports educational training to further educate healthcare practitioners and trainees about the multifactorial nature of body weight, the impact of weight stigma, and strategies to reduce the detrimental health effects of weight stigma on Ohioans.

Action: self-executing

10/6/2022 Update: OSMA worked with Health Impact Ohio to jointly provide CME credit for their June 21, 2022 Future of Healthcare statewide conference. During this event they focused on how to improve healthcare equity, access, and quality it is essential to consider what health care will look like in the future. It did not specifically address Weight Stigma.

Resolution 12-2022 – Divestment from Fossil Fuels

RESOLVED, that our OSMA adopts the following, partially adapted from AMA policy (D-135.969, AMA to Protect Human Health from the Effects of Climate Change by Ending its Investments in Fossil Fuel Companies): The OSMA and "any affiliated corporations or subsidiaries should work in a timely, incremental, and fiscally responsible manner, to the extent allowed by their legal and fiduciary duties, to end all financial investments or relationships (divestment) with companies that generate the majority of their income from the exploration for, production of, transportation of, or sale of fossil fuels"; and, **be it further**

RESOLVED, that our OSMA includes environmental sustainability as an objective within its investment policy; and, **be it further**

RESOLVED, that our OSMA should choose for its commercial relationships, when fiscally responsible, vendors, suppliers, and corporations that have demonstrated environmental sustainability practices that seek to minimize their fossil fuels consumption; and, **be it further**

RESOLVED, that our OSMA will encourage efforts of physicians and other health professional associations to proceed with divestment; and, **be it further**

RESOLVED, that our OSMA shall report every five years to the Council and the House of Delegates, for a period of ten years, on progress toward divestment of fossil fuel investments.

By official action, the House referred Resolution 12-2022.

Action: Auditing & Appropriations Committee received a detailed presentation from our investment advisor regarding Environmental, Social and Governance (ESG) investing at the August meeting and reported and discussed with the Council. In October, the Council approved the addition of ESG language to the OSMA Investment Policy.

Resolution 13 – 2022 – Curbing Opioid-Related Deaths in Ohio through Medication-Assisted Treatment and Harm Reduction Services

RESOLVED, that our Ohio State Medical Association (OSMA) advocates for the use of medication-assisted treatment, including but not limited to methadone or buprenorphine, and harm reduction methods without penalty when clinically appropriate; and, **be it further**

RESOLVED, that our OSMA support public awareness campaigns to increase education of evidence-based services for opioid addiction, including but not limited to medication-assisted treatment, harm reduction, and recovery services; and, **be it further**

RESOLVED, that our OSMA support existing and pilot programs for the distribution of fentanyl test strips in at-risk communities in Ohio.

Action: self-executing

Resolution 14 – 2022 – Eliminating Parking Costs for Patients

RESOLVED, that Ohio State Medical Association work with relevant stakeholders to recognize parking fees as a burden of care for patients and to implement mechanisms for eliminating parking costs.

Action: OSMA staff continues to discuss potential solutions with OHA staff.

Resolution 15 – 2022 – Opposing the Criminalization of Self-Managed Medication Abortion

RESOLVED, that the OSMA amend Policy 07-2020, Legislative or Regulatory Interference in the Practice of Medicine in the State of Ohio, by addition as follows:

Legislative or Regulatory Interference in the Practice of Medicine in the State of Ohio, OSMA Policy 07 – 2020

- 1. The OSMA actively works to ensure that the sanctity of the physician-patient relationship is protected in all legislative and regulatory matters.
- 2. Current OSMA Policy 18 2012 (Criminalization of Medical Care) be amended to read as follows:

The OSMA opposes any portion of proposed legislation or rule that criminalizes clinical practice that is the standard of care.

1. That current OSMA Policy 10 – 1990 (Policy on Abortion) be amended as follows:

1. It is the position of the OSMA that the issue of support of or opposition to abortion is a matter for members of the OSMA to decide individually, based on personal values or beliefs.

2. The OSMA shall take no action which may be construed as an attempt to alter or influence the personal views of individual physicians regarding abortion procedures.

3. Items 1 and 2 notwithstanding, the OSMA shall take a position of opposition to any proposed Ohio legislation or rule that would:

• Require or compel Ohio physicians to perform treatment actions, investigative tests, or questioning of a patient which are not consistent with the medical standard of care; or,

• Require or compel Ohio physicians to discuss treatment options that are not within the standard of care and/or omit discussion of treatment options that are within the standard of care.

Action: self-executing

Resolution No. 16 – 2022 – Allowing Mature Minors to Consent for Vaccination

RESOLVED, that the OSMA supports allowing the mature minor, as defined in Ohio statute or legal precedent, the ability to self-consent for vaccination.

Action: self-executing

Resolution No. 17 – 2022 – Supporting Vaccination in Ohio

RESOLVED, the OSMA supports the right of public and private entities in Ohio to require vaccines for employees, staff, and students for highly communicable diseases while allowing for medical exemptions.

Action: self-executing

Resolution No. 18 – 2022 – Establish Collaborations with the American Medical Association, Liaison Committee On Medical Education, and Ohio Medical Schools to Create Formal Training in Telemedicine

RESOLVED, the Ohio State Medical Association encourages Ohio medical schools to integrate telemedical education into medical school curricula.

Action: self-executing

Resolution No. 19 – 2022 – Advocating Creation of a State-Level All-Payer Claims Database

RESOLVED, our Ohio State Medical Association advocates for the creation of a centralized, comprehensive state-level, all-payer claims database that requires health insurance issuers, including but not limiting to group health plans (self-insured and fully-insured), and non-federal governmental plans to submit claims data.

Action: self-executing

Resolution No. 20 – 2022 – Appropriate Physician Reimbursement to Cover Rising Expenses of Office Practice

RESOLVED, that our Ohio State Medical Association (OSMA) advocate that physician reimbursement for all activities be increased to cover the expenses of running an office practice; and, **be it further**

RESOLVED, that our OSMA work with our Ohio State Legislature and Ohio Congressional delegation to improve physician reimbursement; and, **be it further**

RESOLVED, that the OSMA Delegation to the American Medical Association (AMA) take this resolution regarding improved physician reimbursement to the AMA House of Delegates for action.

Action: self-executing

Also, the Ohio Delegation took this resolution for the June 2022 AMA Meeting. Another resolution was adopted in lieu of this resolution, it was titled Physician Payment Reform and Equity. The Delegation felt that this was an agreeable outcome.

Resolution No. 21 – 2022 – Health Plan Transparency

RESOLVED, Ohio State Medical Association seek Ohio legislation that allows physicians and patients to abide by the transparency requirements by:

- 1. Banning Health Plans from arbitrarily and fraudulently altering CPT codes
- 2. Banning Health Plans from arbitrarily deleting and refusing payment for legitimate and medically necessary CPT codes
- 3. Requiring Health Plans to pay for Prior Authorization, a medical procedure for which the AMA has provided a CPT code, and which is costly to physician offices
- 4. Requiring Health Plans to follow the AMA's CPT provisions and all its guidelines, without picking and choosing which ones to follow and which ones to disregard
- 5. Banning the practice of Health Plans simultaneously providing commercial medical insurance and Medicaid health coverage for the same person. This is a needless waste of Ohio's resources and offers Health Plans the corrupted opportunity to shift payment responsibilities onto the Ohio taxpayer rather than the entity collecting commercial insurance premiums. This practices simply enriches Health Plans.
- 6. Requiring Health Plans to pay for services that are authorized, and to issue appropriate fines to Health Plans which authorize medical care but subsequently refuse payment for it. This is standard practice for all other businesses and health care should be no exception. Failure to follow through with payment will corrupt and confuse Surprise Medical Billing legislation
- 7. Requiring all Health Plans operating in Ohio to be under the jurisdiction of the Ohio State Dept. of Insurance, whether it be an ERISA plan or not. The U.S. Constitution does not allow for the Federal Government to control medical care nor to control insurance matters. Failure to allow for state jurisdiction of Health Plans will cause adherence to the transparency requirements of Surprise Medical Billing legislation to be difficult, if not impossible
- 8. Banning the distinction between "in-network" and "out-of-network" providers, as such is no longer necessary with the advent of Surprise Medical Billing legislation. Health Plans are simply to post its reimbursement rates for ALL of our AMA's CPT codes that apply to ALL patients and ALL physicians regardless of network status. Such transparency will make it possible for physicians and patients to comply with Surprise Medical Billing laws, and know in advance what the financial responsibilities are. Full transparency should be required by ALL entities in the health arena—hospitals and facilities, insurers, physicians, and patients. This will also eliminate the unfair burdens patients routinely experience in being forced to "in-network" facilities.

By official action, the House referred Resolution 21-2022.

Action:

The Government Relations team continues talking to practices to formalize the focus for larger legislative initiatives for the next general assembly.

Resolution No. 22 – 2022 – Medicare and Medicaid Reimbursement

RESOLVED, that Ohio State Medical Association seek to introduce legislation which will bring Ohio Medicaid reimbursement up to parity with Medicare reimbursements; and, **be it further**

RESOLVED, that the Ohio delegation to our American Medical Association carry a resolution which calls for education of beneficiaries particularly in regard to the scope of benefit coverage within Medicare Advantage Plans; and, **be it further**

RESOLVED, that the Ohio Delegation bring to the AMA a resolution seeking an increase in Medicare reimbursement.

Action:

Resolutions 20-2022 and 22-2022 were combined and taken to the J22 AMA Meeting. The intent of the resolutions was to address reimbursement issues and beneficiary education. The Reference Committee combined several similar resolutions for consideration. The result was Alternative Resolution 240 that was adopted by the HOD

The Government Relations team will work during the net budget cycle to see if there are opportunities to add provisions on this issue to the budget bill.

Resolution No. 23 – 2022 – Prohibit Reversal of Prior Authorization

RESOLVED, that our Ohio State Medical Association (OSMA) support legislation to prohibit retroactive denial of a previously approved medication, procedure, or test unless the patient is no longer insured by that company at the time of service.; and, **be it further**

RESOLVED, that our OSMA delegation to the AMA take this topic regarding reversal of prior authorization to the AMA House of Delegates to advocate for this change as a part of their greater effort to eliminate prior authorization all together.

Action: The Ohio Delegation took this resolution to the June 2022 meeting. This resolution was placed on the reaffirmation calendar and was reaffirmed as current AMA Policy.

State law already prohibits reversal based on medical necessity. OSMA has tried to advance full prohibition in the past and will continue to advocate for this in the next general assembly.

Resolution No. 24 – 2022 – Review of Health Insurance Companies and Their Subsidiaries' Business Practices

RESOLVED, that Ohio State Medical Association request that our AMA delegation carry a request for AMA review of health insurance companies' business practices for potential fraudulent and unfair activities.

Action: The Ohio Delegation took this resolution to the June 2022 meeting. This resolution was placed on the reaffirmation calendar and was reaffirmed as current AMA Policy.

Resolution No. 25 – 2022 – Support for Expansion of Anti-discrimination Definition to Include Sexual Orientation and Gender Identity or Expression

RESOLVED, our OSMA support legislative actions to extend the definition of discrimination on the basis of sex to include sexual orientation and gender identity or expression; and, **be it further**

RESOLVED, the OSMA reaffirm OSMA Policy 10-2016.

Action: self-executing

Resolution No. 26 – 2022 – Quality Child Care to Improve Pediatric Population Health

RESOLVED, that our Ohio State Medical Association (OSMA) support the expansion of Publicly-Funded Child Care to increase the stability of child care arrangements, bolster healthy development of Ohio children and improve pediatric population health in the state of Ohio; and, **be it further**

RESOLVED, that our OSMA support improved funding for the evidence-based integration of Child Health Care Consultation services within Publicly Funded Child Care to teach and encourage long-term healthy behaviors; and, **be it further**

RESOLVED, that our OSMA support the implementation of state licensing requirements that are more adherent to the health promoting standards of the Ohio quality rating system, Step Up To Quality, to increase access to high-quality Child Care.

Action: self-executing

Resolution No. 27 – 2022 – Recognition of Climate Change as a Threat to Ohio's Health

RESOLVED, that our OSMA encourages the development of policy to combat climate change and its health effects in Ohio and to mitigate the undesirable environmental conditions that damage Ohioans' health; **and, be it further**

RESOLVED, that our OSMA encourages education of the broader Ohio medical community to the serious adverse health effects of climate change and local conditions of climate variation.

Action: self-executing

Resolution No. 28 – 2022 – Substance Use Disorder in Pregnant People

RESOLVED, our OSMA oppose any efforts to assert that a diagnosis of substance use disorder in a pregnant person alone constitutes child abuse or inherent parental unfitness; and, **be it further**

RESOLVED, our OSMA support prioritizing funding for the expansion of integrative mental health and substance use treatment programs explicitly for pregnant persons; and, **be it further**

RESOLVED, our OSMA oppose the removal of a child based solely on a prenatal drug screen or positive newborn toxicology screening without a full safety evaluation of newborn care upon disposition.

Action: self-executing

Resolution No. 29 – 2022 - Supporting Housing Initiatives to Improve Health of Homeless Individuals

RESOLVED, that our OSMA supports the development of state and local policies that protect the health of low-income and homeless individuals by promoting and funding housing initiatives.

Action: self-executing

Resolution No. 30 – 2022 – Patient-Centered and Evidence-Based Visitation Policies

RESOLVED, that our Ohio State Medical Association (OSMA) support clear and easily accessible visitation policies that are patient-centered and evidence-based in all Ohio healthcare facilities; and, **be it further**

RESOLVED, that our OSMA support the Ohio Hospital Association and other healthcare facility associations' adoption of policies to allow visitors for all patients, including but not limited to children, persons with disabilities, end-of-life care, and labor and delivery units; and, **be it further**

RESOLVED, that our OSMA support collaboration between hospitals and other healthcare facilities within the state of Ohio to create consistent policies.

Action: self-executing

Resolution No. 31 – 2022 – Support For Increased Education and Availability of Supplies for Bleeding Control

RESOLVED, that our OSMA promote the education of both lay public and professional responders on proper bleeding control techniques within the state of Ohio; **and be it further**

RESOLVED, that our OSMA support the increased availability of hemorrhage control supplies (including pressure bandages, hemostatic dressings, tourniquets and gloves) in schools, places of employment, and public buildings.

Action: self-executing