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## **Reports of 2023 Final Floor Actions on Resolutions**

### **Report of Resolutions Committee 1**

#### **Final Floor Actions**

Presented by Margaret Dunn, MD, Chair, District 2

#### **OSMA Policy Sunset Report**

**RESOLVED**, that the recommendations of OSMA Council published prior to the Annual Meeting as the 2023 OSMA Policy Sunset Report be adopted by as amended by the OSMA House of Delegates.

**By official action, the House of Delegates adopted the amended OSMA Policy Sunset Report.**

#### **Resolution No. 1 – 2023 Establish a Women Physicians Section and a Senior Physicians Section**

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

### **ARTICLE IV HOUSE OF DELEGATES**

The House of Delegates shall be the legislative body of this Association and shall consist of: (1) Delegates selected by the Active and Retired Members residing or working within designated OSMA districts; (2) Officers of this Association enumerated in Article VI; (3) Delegates and Alternate Delegates to the American Medical Association from Ohio, Past Presidents and Past Councilors of this Association each of whom shall be an ex-officio member without the right to vote unless such Delegate, Alternate Delegate or Past President be a duly elected Delegate or a duly elected officer of this Association; and (4) such representatives of other medical groups as may be

determined by the House of Delegates, including the following:

The Medical Student Section shall have one (1) Delegate and one (1) Alternate Delegate selected from each of the medical or osteopathic colleges in the state of Ohio to the House of Delegates, said Delegates to be selected in accordance with the Bylaws of the Medical Student Section; provided that the Bylaws of the Medical Student Section have been approved by Council. For purposes of representation in the House of Delegates, Student Members shall not be counted at the individual district level, but shall constitute a separate section which shall be treated and seated as if it were an additional district in which the Student Members of each Ohio medical and osteopathic medical school elect their own Delegate.

The Organized Medical Staff Section shall have one (1) Delegate and one (1) Alternate Delegate to the House of Delegates, said Delegate to be selected in accordance with Bylaws of the Organized Medical Staff Section; provided that the Bylaws of the Organized Medical Staff Section have been approved by Council.

The Resident and Fellows Section shall have five (5) Delegates and two (2) Alternate Delegates to the House of Delegates who must be Members in Training of this Association, said Delegates to be selected in accordance with the Resident and Fellows Section Bylaws; provided that the Bylaws of the Resident and Fellows Section have been approved by Council. For purposes of representation in the House of Delegates, Members in Training shall not be counted at the individual district level, but shall constitute a separate section which shall be treated and seated as if it were an additional district in which the Members in Training elect their own Delegates.

The Young Physician Section shall have one (1) Delegate and one (1) Alternate Delegate to the House of Delegates who must be physicians in active practice and under the age of forty or in the first eight years of practice after residency and fellowship training. The Young Physician Section Delegate shall be selected in accordance with the Young Physicians Section bylaws; provided that the bylaws of the Young Physician Section have been approved by Council.

The International Medical Graduates Section shall have one (1) Delegate and one (1) Alternate Delegate to the House of Delegates. The International Medical Graduate Section Delegates shall be selected in accordance with the International Medical Graduate Section bylaws; provided that the bylaws of the International Medical Graduate Section shall have been approved by the OSMA Council.

THE WOMEN PHYSICIANS SECTION SHALL HAVE ONE (1) DELEGATE AND ONE (1) ALTERNATE DELEGATE TO THE HOUSE OF DELEGATES. THE WOMEN PHYSICIANS SECTION DELEGATES SHALL BE SELECTED IN ACCORDANCE WITH THE WOMEN PHYSICIANS SECTION BYLAWS; PROVIDED THAT THE BYLAWS OF THE WOMEN PHYSICIANS SECTION SHALL HAVE BEEN APPROVED BY THE OSMA COUNCIL.

**THE OSMA SENIOR PHYSICIANS SECTION SHALL INCLUDE ALL MEMBERS AGE 65 AND ABOVE, EITHER ACTIVE OR RETIRED.** THE SENIOR PHYSICIANS SECTION SHALL HAVE ONE (1) DELEGATE AND ONE (1) ALTERNATE DELEGATE TO THE HOUSE OF DELEGATES. THE SENIOR PHYSICIANS SECTION DELEGATES SHALL BE SELECTED IN ACCORDANCE WITH THE SENIOR PHYSICIANS SECTION BYLAWS; PROVIDED THAT THE BYLAWS OF THE SENIOR PHYSICIANS SECTION SHALL HAVE BEEN APPROVED BY THE OSMA COUNCIL.

The medical specialties listed by the American Board of Medical Specialties and approved by Council for representation in the House of Delegates, with final approval by the House of Delegates, are eligible to have one Delegate and one Alternate Delegate for every 50 specialty members or portion thereof above 50 members who are also OSMA voting members to be selected in accordance with Chapter 5, Section 4 of the Bylaws of this Association. The Designated Delegate and Alternate Delegate must be certified as OSMA voting members.

**BYLAWS**  
**CHAPTER 5**  
**THE HOUSE OF DELEGATES**

**SECTION 11. WOMEN PHYSICIANS SECTION.** THE WOMEN PHYSICIANS SECTION SHALL HAVE ONE DELEGATE AND ONE ALTERNATE DELEGATE WHO ARE ALSO OSMA VOTING MEMBERS. THE WOMEN PHYSICIANS SECTION DELEGATE AND ALTERNATE DELEGATE SHALL HAVE ALL THE RIGHTS, PRIVILEGES, AND DUTIES OF OTHER DELEGATES. THE WOMEN PHYSICIANS SECTION DELEGATE AND ALTERNATE DELEGATE WILL BE SEPARATELY SEATED IN THE HOUSE OF DELEGATES WITH OTHER APPROVED SECTIONS.

**SECTION 12. SENIOR PHYSICIANS SECTION.** THE SENIOR PHYSICIANS SECTION SHALL HAVE ONE DELEGATE AND ONE ALTERNATE DELEGATE WHO ARE ALSO OSMA VOTING MEMBERS. THE SENIOR PHYSICIANS SECTION DELEGATE AND ALTERNATE DELEGATE SHALL HAVE ALL THE RIGHTS, PRIVILEGES, AND DUTIES OF OTHER DELEGATES. THE SENIOR PHYSICIANS SECTION DELEGATE AND ALTERNATE DELEGATE WILL BE SEPARATELY SEATED IN THE HOUSE OF DELEGATES WITH OTHER APPROVED SECTIONS.

**By official action, the House of Delegates adopted amended Resolution 01-2023.**

## **Resolution No. 2 – 2023 Establish the OSMA Membership Task Force as an OSMA Standing Committee**

**RESOLVED**, that the OSMA Constitution and Bylaws be amended as follows:

### **CHAPTER 10 COMMITTEES**

**Section 1. Committees.** The standing committees of this Association shall be the Committee on Auditing and Appropriations AND THE COMMITTEE ON MEMBERSHIP. All other committees and task forces of this Association shall be ~~appointed~~ FORMED by the President.

**Section 2. Appointment.** The President with approval of Council shall appoint the chair and members of each committee and task force.

**Section 3. Duties and Responsibilities of Committees and Task Forces.** Each committee and task force shall consider all items referred ~~thereto~~ TO IT by the House of Delegates and the Council. The purpose(s) of each committee and task force shall be prescribed by the Council.

The actions of all committees and task forces shall be subject to the approval of the Council.

**By official action, the House adopted Resolution 02-2023.**

## **Resolution No. 3 – 2023 Physician Assisted Suicide**

**RESOLVED**, the OSMA opposes any bill to legalize physician-assisted suicide or euthanasia, as these practices are fundamentally inconsistent with the physician's role as healer AND TRUSTED SOURCE FOR COMPASSIONATE END OF LIFE CARE; and be it further,

**RESOLVED**, the OSMA reaffirms the physician's duty to compassionately respond to the needs of patients at the end of life, and physicians:

- Must not abandon a patient once it is determined that a cure is impossible;
- Must respect patient autonomy;
- Must provide good communication and emotional support; and,
- Must provide appropriate comfort care and adequate pain control, including referral to hospice medicine and palliative care specialists as appropriate; and  
NOW THEREFORE

**RESOLVED**, the OSMA supports efforts to educate physicians about advanced palliative management techniques for pain and other symptoms, through the

undergraduate, graduate and continuing medical education programs and consistent with the evidence-based medical literature. Physicians should recognize that courts and regulatory bodies readily distinguish between use of narcotic drugs to relieve pain in dying patients and use in other situations; and NOW THEREFORE

**RESOLVED**, the OSMA rescinds Policy 35-1988 – Oppose Voluntary Active Euthanasia (Mercy Killing).

**By official action, the House adopted amended Resolution 03-2023.**

**Resolution No. 4 – 2023 Opposition of State-Expanded General Medicine Conscience Protections for Health Insurers and for Pharmacists without Referral Attempt in Ohio**

**RESOLVED**, that our OSMA oppose any efforts by the state legislature to implement conscience protections that extend to health insurers beyond those afforded by federal statutes; and BE IT FURTHER

**RESOLVED**, that our OSMA support the protection of coverage for medical procedures and treatments under the standard of care from health insurer conscience exemptions; and BE IT FURTHER

~~**RESOLVED**, that our OSMA support a professional and legal obligation for attempt of pharmacy referral within 72 hours when pharmacists exercise their conscience rights in denying the dispensement of medications when prescribed by a licensed medical professional under the standard of care without intent for use in medical abortion.~~

**RESOLVED**, THAT OUR OSMA RECOGNIZES A PROFESSIONAL AND LEGAL OBLIGATION THAT WHEN PHARMACISTS EXERCISE THEIR CONSCIENCE RIGHTS IN REFUSING TO DISPENSE MEDICATIONS THAT ARE PRESCRIBED BY A LICENSED MEDICAL PROFESSIONAL UNDER THE STANDARD OF CARE, THEY MUST IMMEDIATELY NOTIFY THE PRESCRIBING PHYSICIAN AND REFER THE PATIENT TO A NEARBY PHARMACIST OR PHARMACIES THAT WILL FILL THE PRESCRIPTION.

**By official action, the House adopted amended Resolution 04-2023.**

**Resolution No. 5 – 2023 Protection for Physician Administration of Gender Affirming Care**

**RESOLVED**, that our OSMA oppose any efforts to ban the administration of evidence-based care to patients when determined to be clinically indicated by their physician; be it further

**RESOLVED**, that our OSMA oppose legislative or regulatory actions that would penalize physicians, Allied Health professionals, or healthcare entities who administer evidence-based gender-affirming care to patients; AND BE IT FURTHER

**RESOLVED**, THAT OUR OSMA REAFFIRMS OSMA POLICY 15-2020 – SUPPORTING GENDER-AFFIRMING CARE FOR TRANSGENDER AND GENDER MINORITY PATIENTS.

**By official action, the House adopted amended Resolution 05-2023.**

### **Resolution No. 6 – 2023 Neutralize the OSMA Language Against a Public Option and Single Payer**

**RESOLVED**, that the Ohio State Medical Association continues to express its support for INCREASED access to comprehensive, affordable, high-quality health care by ~~neutralizing language in current policies that oppose single-payer systems;~~ and be it further

**RESOLVED**, that the Ohio State Medical Association (OSMA) rescind current Policy 11 – 2010 – Promoting Free Market-Based Solutions to Health Care Reform ~~to neutralize language opposing a public insurance option and single-payer systems; and be it further~~

~~**RESOLVED**, the Ohio State Medical Association rescind Policy 13 – 1995 Privatizing Medicare; and be it further~~

~~**RESOLVED**, the Ohio State Medical Association rescind Policy 14 – 1995 Privatizing Medicaid.~~

Title Change: **INCREASED ACCESS TO HEALTH CARE**

**By official action, the House adopted amended Resolution 06-2023.**

### **Resolution No. 7– 2023 Establishing Support for the Regulation of Endocrine Disrupting Chemicals in Food, Agricultural, and Household Products**

**RESOLVED**, that OSMA supports the investigation and regulation of the use of endocrine-disrupting chemicals in food, agricultural, and household products; ~~and, be it further~~

~~**RESOLVED**, That Our OSMA supports legislation to investigate and regulate the use of endocrine-disrupting chemicals in products manufactured or sold in the state of Ohio.~~

**By official action, the House adopted Resolution 07-2023.**

### **Resolution No. 8 – 2023 Reducing Barriers and Eliminating Disparities Surrounding Use of Medications for Opioid Use Disorder in Ohio**

~~**RESOLVED**, That our Ohio State Medical Association amend existing Policy 13-2022 to include advocacy for legislation prohibiting prior authorization requirements and other restrictions on use of evidence-based medications for opioid use disorder; and be it further~~

~~**RESOLVED**, that Policy 13-2022 be amended to include OSMA support for research, policy, and education concerning the impacts of racism and classism on patient awareness of and access to substance use disorder treatment.~~

**RESOLVED**, THAT OSMA POLICY 13-2022 - CURBING OPIOID-RELATED DEATHS IN OHIO THROUGH MEDICATION-ASSISTED TREATMENT AND HARM REDUCTION SERVICES BE AMENDED TO READ AS FOLLOWS:

1. The 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.
2. The OSMA supports 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.
3. The OSMA supports existing and pilot programs for the distribution of fentanyl test strips in at-risk communities in Ohio.
4. THE OSMA SUPPORTS LEGISLATION PROHIBITING PRIOR AUTHORIZATION REQUIREMENTS AND OTHER RESTRICTIONS ON USE OF EVIDENCE-BASED MEDICATIONS FOR OPIOID USE DISORDER.
5. THE OSMA SUPPORTS RESEARCH, POLICY, AND EDUCATION CONCERNING THE IMPACTS OF RACISM AND CLASSISM ON PATIENT AWARENESS OF AND ACCESS TO SUBSTANCE USE DISORDER TREATMENT.

**By official action, the House adopted Resolution 08-2023.**

## **Resolution No. 9 – 2023 Codifying ACA Preventative Care Provisions**

**RESOLVED**, that our OSMA will advocate for requiring all ~~fully insured private~~ AND PUBLIC payers in Ohio to cover, without cost sharing to plan holders or beneficiaries, ~~preventative~~ PREVENTIVE care services including 1) services with an “A” or “B” rating in the current recommendations of the U.S. Preventive Services Task Force (USPSTF); and 2) immunizations recommended by the Advisory Committee on Immunization Practices (ACIP); and 3) ~~preventative~~ PREVENTIVE care and screenings for infants, children, and adolescents in comprehensive guidelines supported by the Health Resources and Services Administration (HRSA); and 4) ~~preventative~~ PREVENTIVE care and screenings for women’s health specified in HRSA guidelines. ~~by codifying Section 2713 of the Affordable Care Act (ACA) and be it further-~~

~~**RESOLVED**, that our OSMA will advocate for the coverage of preventative healthcare in all private and public health plans, including plans covered by the Employment Retirement Income Security Act of 1974 (ERISA).~~

Title Change: **Codifying ACA PREVENTIVE Care Provisions**

**By official action, the House adopted amended Resolution 09-2023.**

## **Resolution No. 10 – 2023 Supporting Increased Access to HIV Prevention Medication**

**RESOLVED**, that our OSMA opposes prior authorization requirements for HIV pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP) medications; and be it further

**RESOLVED**, that our OSMA supports requiring state-regulated payers to cover full costs of HIV prevention medications and related services, including screenings, diagnostic procedures, administrative fees, and clinical follow-ups in-person or via telemedicine, without any cost-sharing obligation for the plan holder; and be it further

**RESOLVED**, that our OSMA supports legislation requiring all payers in Ohio to add long-acting injectable variations of PrEP to their formularies to ensure that they are accessible to eligible patients.

**By official action, the House adopted Resolution 10-2023.**

## **Resolution No. 11 – 2023 Lead Poisoning Prevention**

**RESOLVED**, that our OSMA partner with relevant stakeholders to support increasing the identification and testing of blood lead levels in Ohio children in areas for

high-risk of lead exposure ~~and~~ AND/OR enrolled in Medicaid, in line with state and federal guidelines and laws; and be it further

**RESOLVED**, that our OSMA advocates for the transparent dissemination of lead screening and testing data ~~by race and ethnicity~~ TO PHYSICIANS AND THE GENERAL PUBLIC AT LARGE, WITH AN EMPHASIS ON INDIVIDUALS OF LIMITED ECONOMIC MEANS, to allow for future targeted interventions in addressing race-based and socioeconomic disparities; AND BE IT FURTHER

**RESOLVED**, THAT OUR OSMA ADVOCATE FOR THE IDENTIFICATION AND ABATEMENT OF LEAD THAT HAS BEEN IDENTIFIED IN HOUSING IN THE STATE OF OHIO, AND SUPPORT THE PUBLIC FUNDING OF THIS REMOVAL.

**By official action, the House adopted amended Resolution 11-2023.**

#### **Resolution No. 12 – 2023 Support of Improving Cardiovascular Screenings by Including Lipoprotein(a) (Lp(a))**

**RESOLVED**, that our OSMA supports Research into ~~Lp(a)~~ LIPOPROTEIN(A) (LP(A)) for cardiovascular risk assessment.

Title Change: **SUPPORTING RESEARCH INTO THE INCLUSION OF LIPOPROTEIN(A) (LP(A)) INTO Cardiovascular Screenings**

**By official action, the House did not adopt Resolution 12-2023.**

#### **Resolution No. 13 – 2023 Supporting Environmental Sustainability in Hospitals and Physician Offices**

**RESOLVED**, that our OSMA (1) supports initiatives to promote environmental sustainability by healthcare facilities AND ENTITIES across Ohio, and (2) supports physicians ~~in adopting~~ SEEKING TO ADOPT programs for environmental sustainability in their practices.

**By official action, the House adopted amended Resolution 13-2023.**

#### **Resolution No. 14 – 2023 Creating a Pilot Program to Address Period Poverty in Underserved Ohio Public Schools**

**RESOLVED**, our OSMA supports ~~a partnership with stakeholders to create a pilot program providing menstrual hygiene products at no cost to students in underserved Ohio public schools in an effort to address period poverty;~~ and be it further

~~RESOLVED~~, our OSMA supports a partnership with relevant stakeholders to increase INCREASED GENERAL access to menstrual hygiene products. in an effort to address period poverty.

Title Change: **SUPPORT FOR INCREASED ACCESS TO MENSTRUAL HYGIENE PRODUCTS IN OHIO**

**By official action, the House adopted amended Resolution 14-2023.**

### **Resolution No. 15 – 2023 Opposition to Indoor Tanning for Minors**

~~RESOLVED~~, That the OSMA oppose indoor tanning for minors. and, be it further

~~RESOLVED~~, That this resolution should be taken to the AMA for consideration.

**By official action, the House adopted amended Resolution 15-2023.**

### **Emergency Resolution No. 01 – 2023 Support for Residents Impacted by the East Palestine Train Derailment**

~~RESOLVED~~, that the Ohio State Medical Association make a public statement of support for our patients and the residents ALL INDIVIDUALS affected by the East Palestine crisis INCLUDING THE PHYSICIANS WHO CARE FOR THEM; and be it further

~~RESOLVED~~, that the Ohio State Medical Association encourage the Ohio Department of Health and federal partners to continue soil and water testing in the region to identify areas at risk for toxic exposures from the soil and/or water; AND BE IT FURTHER

~~RESOLVED~~, THAT ALL PARTIES INVOLVED WITH THE TOXIC CHEMICALS SPILL FROM THE EAST PALESTINE TRAIN DERAILMENT, INCLUDING STATE AND FEDERAL GOVERNMENT AGENCIES, PROVIDE CONTINUED HEALTH, FINANCIAL AND EDUCATIONAL SUPPORT TO INDIVIDUALS EXPOSED TO THE TOXIC CHEMICALS ASSOCIATED WITH THIS DISASTER.

**By official action, the House adopted amended Emergency Resolution 01-2023.**

### **Report of Resolutions Committee 2**

#### **Final Floor Actions**

Presented by Brian L. Bachelder, MD, Chair, 7<sup>th</sup> District

## **Resolution No. 16 – 2023 Strengthening the OSMA Stance on Abortion Policy in Ohio**

**RESOLVED**, that our OSMA amend OSMA Policy 10-1990- Policy on Abortion by addition and deletion as follows:

### **Policy 10 – 1990 – Policy on Abortion**

~~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.~~

12. 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.

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

- Require or compel Ohio physicians to perform treatment actions, investigative tests, or questioning and OR education 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; and be it further

~~**RESOLVED** that our OSMA supports an individual's right to have an abortion up until the moment of viability or other nationally accepted medical standard; and be it further~~

**RESOLVED**, THAT OUR OSMA SUPPORTS AN INDIVIDUAL'S RIGHT TO DECIDE WHETHER TO HAVE CHILDREN, THE NUMBER AND SPACING OF CHILDREN, AS WELL AS THE RIGHT TO HAVE THE INFORMATION, EDUCATION, AND ACCESS TO **EVIDENCE-BASED** REPRODUCTIVE HEALTH **CARE** SERVICES TO MAKE THESE DECISIONS; AND BE IT FURTHER

**RESOLVED**, that our OSMA opposes NON-EVIDENCE BASED limitations on access to evidence-based reproductive health CARE services, including fertility treatments, contraception, and abortion; and be it further

**RESOLVED**, that our OSMA opposes the imposition of criminal and civil penalties or other retaliatory efforts against patients, patient advocates, physicians, other healthcare workers, and health systems for receiving, assisting in, referring patients to, or providing evidence-based reproductive health CARE services within the medical standard of care; and be it further

**RESOLVED**, that our OSMA collaborates with relevant stakeholders to encourage amendments to EDUCATE LEGISLATORS AND AMEND existing state laws so that a THE TERM “fetal heartbeat” is NOT USED TO INACCURATELY REPRESENT PHYSIOLOGICAL ELECTRICAL ACTIVITY ~~inaccurately stated as synonymous with the first evidence of embryonic cardiac activity.~~

**By official action, the House adopted amended Resolution 16-2023.**

### **Resolution No. 17 – 2023 Opposition to Criminalization of Pregnancy Loss**

**RESOLVED**, that our OSMA will advocate (1) that pregnancy loss shall not be criminalized for physicians or patients, and (2) that physicians and patients should not be held civilly and/or criminally liable for pregnancy loss as a result of medical care.

**By official action, the House adopted Resolution 17-2023.**

### **Resolution No. 18 – 2023 Rescind Abortion Policy 13-1973**

**RESOLVED**, the OSMA rescinds Policy 13-1973 – Abortion as a Medical Procedure.

**By official action, the House adopted Resolution 18-2023.**

### **Resolution No. 19 – 2023 Support for Access to Emergency Contraception**

**RESOLVED**, that our Ohio State Medical Association rescind Policy 22 - 2001; and be it further

**RESOLVED**, that our Ohio State Medical Association supports patient access to all EVIDENCE BASED methods of emergency contraception ~~that are nationally accepted as part of the standard of care;~~ and be it further

**RESOLVED**, that our Ohio State Medical Association acknowledges emergency contraception as a necessary component of ~~patient~~ patient education on contraception.

**By official action, the House adopted amended Resolution 19-2023.**

### **Resolution No. 20 – 2023 Moratorium on Utility Discontinuation in Pregnancy and 12 Months Postpartum**

**RESOLVED**, that Ohio State Medical Association work with relevant stakeholders to establish a moratorium on utility discontinuation, THROUGH A SINGLE MEDICAL CERTIFICATE FOR THE DURATION OF ~~during~~ pregnancy and in the first

year of the infant's life, in order to ensure optimal health for both individuals; and be it further ~~(Directive to Take Action)~~

**RESOLVED**, that the Ohio State Medical Association support increasing education about utilities payment plans available to at-need Ohioans that may be used to pay off charges accrued while the medical certificate was in effect. ~~(Directive to Take Action)~~.

**By official action, the House adopted Resolution 20-2023.**

### **Resolution No. 21 – 2023 Utilizing Principles of Collective Impact to Address Pregnancy-Related Mortality in Ohio**

**RESOLVED**, that our OSMA supports legislation and government action that works to foster research and/or directly affect maternal mortality rates in the state of Ohio; and be it further resolved

**RESOLVED**, that our OSMA ~~utilize principles of Collective Impact through collaboration~~ COLLABORATE with Ohio Pregnancy Associated Mortality Review and Ohio Council to Advance Maternal Health to address pregnancy related morbidity and mortality in Ohio; and be it further

**RESOLVED**, that our OSMA Collaborate with healthcare facilities and other relevant stakeholders to support the development of resources to train healthcare providers in identification and referral of patients for participation in community health pregnancy-related morbidity and mortality programs.

**By official action, the House adopted amended Resolution 21-2023.**

### **Resolution No. 22 – 2023 Comprehensive Reproductive Health Care Training in Medical Schools**

**RESOLVED**, that our OSMA supports the protection and delivery of evidence-based, comprehensive reproductive health care training including training in abortion and family planning for Ohio medical students, residents, and trainees; and be it further

**RESOLVED**, that our OSMA opposes legislation limiting comprehensive reproductive health care training, which includes abortion and family planning training, ~~in Ohio medical schools.~~

Title Change: **Comprehensive Reproductive Health Care Training in Medical Schools**

**By official action, the House adopted amended Resolution 22-2023.**

## **Resolution No. 23 – 2023 Allow Unmatched Medical School Graduates to Practice as Dependent Physicians Under Physician Supervision**

**RESOLVED**, that our OSMA work with state specialty societies to support these unmatched graduate medical students through their legislators and regulators to allow these physicians to work in underserved areas, in primary care, only in collaboration with a licensed physician until the unmatched graduate medical student begins their post-graduate medical education; and be it further

**RESOLVED**, that our OSMA will advocate for and support changes to state laws and regulations to allow for unmatched medical school graduates to practice as Dependent Physicians, subject to meeting the specific criteria and requirements established by the state medical board; and be it further

**RESOLVED**, that our OSMA should work with state medical boards and other relevant organizations to establish and promote the use of unmatched medical school graduates, as a way to address the shortage of physicians; and be it further

**RESOLVED**, that our OSMA will work with commercial insurers, state entities and the Centers for Medicare and Medicaid Services to reimburse for services rendered by these unmatched medical school graduates working in their collaborative practices; and be it further

**RESOLVED**, that our OSMA continue to advocate for expansion of residency slots through increased GME funding to limit the number of unmatched graduate medical students; and be it further

**RESOLVED**, that our OSMA oppose any effort by these unmatched graduating physicians working in collaboration with licensed physicians, to become independent licensed physicians without satisfactorily completing formal residency training.

**By official action, the House did not adopt Resolution 23-2023.**

## **Resolution No. 24 – 2023 Support for Expanding Graduate Medical Education Funding**

**RESOLVED**, that our OSMA supports and encourages states to incentivize private investments in GME programs by offering tax credits or other incentives to foundations, corporations and individuals who provide support; and be it further

**RESOLVED**, that our OSMA advocate for increasing federal funding for GME programs, and at every opportunity, support the repeal of the cap on GME funded positions by the 1997 Balanced Budget Act; and be it further

**RESOLVED**, that our OSMA work with relevant stakeholders, including the Ohio Hospital Association and the Association of American Medical Colleges, to develop and implement strategies for increasing GME funding and improving the quality of medical education in Ohio.

**By official action, the House adopted Resolution 24-2023.**

### **Resolution No. 25 – 2023 Coverage of Restorative Care for Survivors of Domestic Abuse or Intimate Partner Violence**

**RESOLVED**, that our OSMA urge all payers to consider any reconstructive medical and dental treatments for physical injury sustained from or directly related to domestic and intimate partner violence as restorative treatments; and be it further

**RESOLVED**, that our OSMA work with relevant stakeholders such as the American Medical Association and the Centers for Medicare and Medicaid Service to encourage payers to cover costs associated with reconstructive treatments for physical injury sustained from abuse for survivors of domestic and/or intimate partner violence or abuse; and be it further

**RESOLVED**, that our OSMA support legislation by the Ohio General Assembly to require all third-party payers, including Medicaid MCOs, to reimburse reconstructive services provided for treatment of physical injury in addition to the medically-necessary restorative care provided to victims of domestic and intimate partner abuse..

**By official action, the House adopted Resolution 25-2023.**

### **Resolution No. 26 – 2023 Codifying Efforts for Legislative Action on Prior Authorization**

**RESOLVED**, that our OSMA will seek legislative solutions to reduce the burden of prior authorization requirements; and be it further

**RESOLVED**, that our OSMA advocacy team will report back annually to the House of Delegates on the status of prior authorization advocacy efforts unless deemed unnecessary by Council.

**By official action, the House adopted Resolution 26-2023.**

### **Resolution No. 27 – 2023 Reimbursement for Medical Interpreter Services**

**RESOLVED**, that our OSMA will prioritize physician reimbursement for interpreter services, including American Sign Language, and advocate for legislative

and/or regulatory changes to state health care programs such as Medicaid and other managed care plans, for payment for such services; and be it further

**RESOLVED**, that our OSMA will continue to work with interested state and specialty societies to advocate for physician reimbursement for interpreter services, including American Sign Language, BY commercial health plans and workers' compensation plans, for payment for such services; and be it further

**RESOLVED**, that our OSMA work with the Ohio Department of Medicaid to eliminate all unfunded mandates related to patient care.

**By official action, the House adopted amended Resolution 27-2023.**

### **Resolution No. 28 – 2023 Decrease Costs for Ohio Patients with Diabetes with Commercial Insurance**

**RESOLVED**, that our OSMA will: (1) encourage the Ohio Department of Insurance to investigate insulin pricing and market competition and take enforcement actions as appropriate; (2) support initiatives that provide physician education regarding the cost-effectiveness of insulin therapies; and (3) support state efforts to limit the ultimate expenses incurred by commercially insured patients for prescribed insulin and diabetic equipment and supplies.

**By official action, the House adopted Resolution 28-2023.**

### **Resolution No. 29 - 2023 Law Enforcement Escorting Incapacitated Patients to the Emergency Department**

**RESOLVED**, that our OSMA advocate that law enforcement remain with any patient they bring to the emergency department who are intoxicated, altered, agitated, or otherwise pose a risk to the safety of themselves or others until a disposition has been determined, or at which time they mutually agree with the treating physician that their assistance is no longer needed; AND BE IT FURTHER

**RESOLVED**, THAT COUNCIL BE DIRECTED TO STUDY THE WORKPLACE VIOLENCE PREVENTION ACT FOR HEALTH CARE AND SOCIAL SERVICE WORKERS AND THE SAFETY FROM VIOLENCE FOR HEALTHCARE EMPLOYEES (SAVE) ACT FOR IMPLEMENTATION OF BEST PRACTICES FOR THE STATE OF OHIO.

**By official action, the House adopted amended Resolution 29-2023.**

### **Resolution No. 30 – 2023 Support for 988 Response System**

**RESOLVED**, that our OSMA encourage the Ohio Legislature and the Ohio Department of Mental Health and Addiction Services (OhioMHAS) to establish an appropriate, sustainable funding plan to ensure the long-term success of 988 in Ohio.

**By official action, the House adopted Resolution 30-2023.**

**Resolution No. 31 – 2023 Clarification of Prescription Abbreviations (QD, BID, TID, QID)**

**RESOLVED**, that our Ohio State Medical Association be part of the effort to remove the old and dangerous Latin medical abbreviations QD, BID, TID, and QID and replace them with more accurate medical instructions such as: every 24 hours, every 12 hours, every 8 hours, and every 6 hours.

**By official action, the House did not adopt Resolution 31-2023.**