AMA RESOLUTION #125
Title: Rising Generic Drug Prices
Action: ADOPTED AS SUBSTITUTED

Substitute Resolution 106 was adopted in lieu of Resolutions 117, 124, 125 and 127.

RESOLVED, That our American Medical Association work collaboratively with relevant federal and state agencies, policymakers and key stakeholders (e.g., the U.S. Food and Drug Administration, the U.S. Federal Trade Commission, and the Generic Pharmaceutical Association) to identify and promote adoption of policies to address the already high and escalating costs of generic prescription drugs; and be it further

RESOLVED, That our AMA advocate with interested parties to support legislation to ensure fair and appropriate pricing of generic medications, and educate Congress about the adverse impact of generic prescription drug price increases on the health of our patients; and be it further

RESOLVED, That our AMA encourage the development of methods that increase choice and competition in the development and pricing of generic prescription drugs; and be it further

RESOLVED, That our AMA support measures that increase price transparency for generic prescription drugs.

AMA RESOLUTION #225
Title: Make Simplicity the Foremost Criteria for Any CMS Program
Action: ADOPTED AS AMENDED

RESOLVED, That our American Medical Association continue to advocate for simplicity in any current or future programs initiated by the Centers for Medicare & Medicaid Services (CMS) that impact physicians; and be it further

RESOLVED, That our AMA continue to advocate by all means necessary that any current or future programs initiated by the Centers for Medicare and Medicaid Services be summarized into an executive summary format or other format that is easily comprehensible to physicians, medical staff and administration in a medical office.

AMA RESOLUTION #226
Title: Physician Involvement with Health Care Related Businesses
Action: REAFFIRMED

RESOLVED, That our American Medical Association support physician-owned health care businesses being held to the same business standards as non-physician-owned health care businesses; and be it further
RESOLVED, That our AMA seek legislative and regulatory changes at the federal level to allow physicians to create, own, and support health care related businesses; utilize all available tools inside and outside of their practices; and, refer patients to these businesses for medically necessary services.

**AMA RESOLUTION #227**
Title: Partial Credit for Eligible Professionals for Accomplishing Meaningful Use Guidelines
Action: REFERRED

Originally, the Reference Committee recommended that Substitute Resolution 224 (below) be adopted in lieu of Resolutions 227 and 228. The item was extracted and ultimately referred.

RESOLVED, That our American Medical Association reaffirm policies D-478.982, H-478-991, and D-478.994 (Reaffirm HOD Policy); and be it further

RESOLVED, That our AMA work with the Centers for Medicare & Medicaid Services and other relevant stakeholders to allow for partial credit for the eligible professionals accomplishing one or more objectives in the meaningful use program); and be it further

RESOLVED, That our AMA engage with electronic health record (EHR) vendors to develop and provide mitigation strategies and continuity training solutions to reduce the negative effects of system downtime and other technology disruption); and be it further

RESOLVED, That our AMA seek to mitigate the expense and loss of productivity caused by technology failures by advocating for hardship exemptions from the Meaningful Use program for eligible professionals who experience these problems; and be it further

RESOLVED, That our AMA develop model language to be included in EHR vendor contracts with eligible professionals that protects the eligible professional in the event of downtime due to vendor error and other technology problems.

**AMA RESOLUTION #229**
Title: Physician Self-Monitoring of Controlled Substance Prescriptions
Action: ADOPTED AS AMENDED

RESOLVED, That our American Medical Association work with the National Alliance for Model State Drug Laws (NAMSDL), as well as other appropriate national organizations and stakeholders, to update the NAMSDL’s Model Prescription Monitoring Program Act to provide health care professionals the opportunity to review their schedule 2-5 controlled substance prescribing patterns as a means to help monitor appropriate prescribing and detect and identify fraudulent prescriptions dispensed under their respective Drug Enforcement Administration numbers.

**AMA RESOLUTION #231**
Title: Opposing the Federation of State Medical Boards Interstate Medical Licensure Compact
Action: Resolution 235 was adopted in lieu of Resolutions 230 and 231

RESOLVED, That our American Medical Association, in collaboration with the Federation of State Medical Boards and interested state medical boards, request a clarifying statement from the Interstate Medical Licensure Compact Commission that the intent of the language in the model legislation
requiring that a physician “holds” specialty certification refers only to initial specialty certification recognized by the American Board of Medical Specialties or the American Osteopathic Association's (AOA’s) Bureau of Osteopathic Specialists and that there is no requirement for participation in ABMS’s Maintenance of Certification or AOA’s Osteopathic Continuous Certification (OCC) program in order to receive initial or continued licensure under the Interstate Medical Licensure Compact.

**AMA RESOLUTION #322**

**Title:** Board of Medicine Sanctions and Fines  
**Action:** NOT ADOPTED

RESOLVED, That our American Medical Association work with the Federation of State Medical 35 Boards to study the various sanctions, fines, and monitoring procedures applied on a state-by-state basis to physicians under investigation and/or disciplinary action.

**AMA RESOLUTION #323**

**Title:** Ensuring Equality in Loan Repayment Programs for Married Couples  
**Action:** ADOPTED

RESOLVED, That our American Medical Association oppose any stipulations in loan repayment programs that place greater burdens upon married couples than for similarly-situated couples who are cohabitating.

**AMA RESOLUTION #324**

**Title:** Proposing Changes to Public Service Loan Forgiveness  
**Action:** ADOPTED AS AMENDED

RESOLVED, That our American Medical Association advocate for maintaining a variety of student loan repayment options to fit the diverse needs of graduates; and be it further

RESOLVED, That our AMA work with the United States Department of Education to ensure that any cap on loan forgiveness under the Public Service Loan Forgiveness program be at least equal to the principal amount borrowed; and be it further

RESOLVED, That our AMA ask the United States Department of Education to include all terms of Public Service Loan Forgiveness in the contractual obligations of the Master Promissory Note.

**AMA RESOLUTION #325**

**Title:** Broaden Conflict of Interest Disclosure  
**Action:** NOT ADOPTED

RESOLVED, That our American Medical Association work with the Accreditation Council for Continuing Medical Education and the American Osteopathic Association pertaining to any continuing medical education programming to broaden their required conflict of interest disclosure and management of conflict of interest to include all forms of funding including, but not limited to: employers, corporations, drug companies, governmental entities (e.g., National Institutes of Health), foundations, speaker’s bureaus, speaking engagements, and universities.
AMA RESOLUTION #421  
Title: Raise Minimum Legal Age to Purchase Tobacco Products to 21  
Action: ADOPTED AS AMENDED

The amended Policy H-495.986 below, which includes the amendment provided in Resolution 421, was adopted in lieu of Resolutions 421 and 424. Additionally, AMA policies H-495.973, H-490.909 and H-495.972 were reaffirmed.

H.495.986 and Distribution of Tobacco Products and Electronic Nicotine Delivery Systems (ENDS) and E-cigarettes

Our AMA (1) encourages the passage of laws, ordinances and regulations that would set the minimum age for purchasing tobacco products, including electronic nicotine delivery systems (ENDS) and e-cigarettes, at 21 years, and urges strict enforcement of laws prohibiting the sale of tobacco products to minors.

AMA RESOLUTION #520  
Title: Ban Routine Use of Antibiotics in Animal Feed  
Action: REAFFIRMED

RESOLVED, That our American Medical Association advocate for a total ban of antibiotics in animal feed to reduce the incidence of spillage to natural systems and to reduce the emergence of multi-drug resistant organisms that are difficult to treat.

AMA RESOLUTION #521  
Title: Promoting Good Fomite Stewardship in Clinical Settings  
Action: REAFFIRMED

RESOLVED, That our American Medical Association educate physicians regarding the best practices for cleaning portable electronic devices and other fomites.

AMA RESOLUTION #522  
Title: Medication Expiration Dates  
Action: ADOPTED

RESOLVED, That our American Medical Association amend Policy H-115.983 by addition and deletion as follows:

H-115.983 Expiration Dates and Beyond-Use Dates of Prescription and Over-the-Counter Drug Products

Our AMA: (1) supports the inclusion of expiration dates on the containers/labels of prescription and over-the-counter drug products and recommends that expiration dates be determined by pharmaceutical manufacturers using scientifically based stability testing with subsequent approval by the Food and Drug Administration (FDA); (2) urges the pharmaceutical industry, in collaboration with purchasers, the FDA, and the United States Pharmacopeia (USP), to determine whether lengthening of expiration dates will provide clinical and/or economic benefits or risks for patients and, if this is the case, to conduct longer stability testing on their drug products; (3) urges the FDA to work with the pharmaceutical industry and the USP to develop a schedule for the review and re-evaluation of
expiration dates of prescription and over-the-counter drug products; (4) recommends that pharmacists place a beyond-use date on the labeling of all prescription medications dispensed to patients, and that the beyond-use date be based on the recommendations in the most recent edition of the United States Pharmacopeia and National Formulary (currently USP 24-NF 19) (official January 1, 2000); and (5)(4) encourages the USP, in collaboration with pharmaceutical manufacturers, pharmacy organizations, and the FDA, to continue to explore the development of appropriate stability tests for the determination of scientifically sound beyond-use dates for repackaged products.

AMA RESOLUTION #523
Title: Evaluation of Canadian Underground Nuclear Waste Repository
Action: ADOPTED AS AMENDED

RESOLVED, That our American Medical Association, along with state and county medical societies, urge Congress, the President, and the Secretary of State to invoke the participation of the International Joint Commission to evaluate the proposed underground nuclear waste repository in Ontario, Canada, and similar facilities.

AMA RESOLUTION #608
Title: Fiduciary Responsibility and the AMA Interim Meeting
Action: NOT ADOPTED

RESOLVED, That our American Medical Association, to be prudent to all its members and components, exercise absolute fiduciary responsibility by: (1) immediately discontinuing the AMA Interim Meeting of the House of Delegates outside of the contiguous states to meet this achievement, and (2) immediately cancelling any such meetings and finding appropriate alternatives--knowing that any penalties of such action will be much less than spending the monies to hold the meeting at such a location. Achieving such fiduciary responsibility will engender tremendous good will among its membership and can serve as an example to aid in new member acquisition.

AMA RESOLUTION #609
Title: Physician Entrepreneur Academy
Introduced by: Brian Rutledge, MD, for the Wayne County Delegation
Action: ADOPTED

RESOLVED, That our American Medical Association study the possibility of developing an entrepreneur and business training academy to offer online and onsite training and skill development for AMA members.