



REPORT OF ACTIONS FROM THE 2023 HOUSE OF DELEGATES AND UPDATES

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Resolutions Referred to the Board of Governors:

P 250.007, Childhood Immunization Law
Public Policy Compendium

Resolution 23-105, Protecting Access to Reproductive Health
American College of Obstetrics and Gynecology District XII

Resolution 23-109, Training in Graduate Medical Education Programs
Resident and Fellow Section

Resolution 23-110, Firearm Safety Signage
Northeast Florida Delegation

Resolution 23-111, Rescind Resolution 21-105
Jon Ward, M.D., Emerald Coast Medical Association

Resolution 23-113, Right of Physicians to Follow their Conscience
Dade County Medical Association, Broward County Medical Association

Resolution 23-118, Opposition of Conversion Therapy for Gender Dysphoria
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Resolution 23-119, Physician Effort to Place Abortion Amendment on the Ballot in 2024
Broward County Medical Association, Linda Kaplan, M.D.

Resolution 23-308, Provision of Immigrant Healthcare
Alachua County Medical Society

Resolution 23-314, Clarifying and Defining the Roles of Healthcare Providers in Spanish
Medical Student Section

Resolution 23-406, Non-Emergent Treatment of Patients in an Outpatient Environment
South Florida Caucus



Action of Recommendations from the Board of Governors

Board Recommendation A-1 2015 FMA Policy Review – Reaffirmation and Sunset

House Action: 250.007 was referred to the Board of Governors for study and report back, remaining policies were reaffirmed and sunset as presented in original report.

Board Recommendation A-2 Resolution 22-105, Minimal Credentialing in Post-Acute and Long-Term Care Medicine

Board of Governors Recommendation: **Resolution 22-105 not be adopted**

House Action: **Adopted BOG Recommendation**

RESOLVED, That the Florida Medical Association promotes a professional standard that all health care providers practicing in the Post-Acute and Long-Term Care (PALTC) setting will present, at a minimum, proof of identification, i.e., a current government issued photo identification (e.g., driver's license), a current state issued professional license, and, as appropriate, a current DEA certificate.

Board Recommendation A-3 Resolution 22-106, Requirement for Minimum Education Standards for Medical Directors

Board of Governors Recommendation: **Resolution 22-106 not be adopted**

House Action: **Adopted BOG Recommendation**

RESOLVED, That the Florida Medical Association support and encourage all initiatives (Federal, State and Local) to promote minimum education standards for physicians serving in the role of Medical Director in Post-Acute and Long-Term Care, to include the completion of a specified number of initial and maintenance education credits within a defined time period.

Board Recommendation A-4 Resolution 22-108, Promoting, Supporting Clinical Research

Board of Governors Recommendation: **Resolution 22-108 not be adopted**

House Action: **Adopted BOG Recommendation**



RESOLVED That the FMA develop and promulgate an educational campaign directed to the public and medical community to clarify how clinical research is performed in the U.S.; and be it further

RESOLVED, That the FMA promote clinical research by facilitating the identification of clinical research activity in component society areas to create a community-based resource for interested public and medical community members; and be it further

RESOLVED, That the FMA provide physicians conducting clinical research in their communities with the tools necessary to promote the importance of clinical research and reinforce the trust-building needed for vibrant participation of the public and the medical community; and be it further

RESOLVED, That the FMA formulate an Action Plan for Promoting Clinical Research (APPCR) that can be carried through to component societies, including but not limited to:

- a. Identifying physicians involved in clinical research
- b. Facilitating the formation of research networks
- c. Creating a website for listing clinical trials, case studies and involved physicians
- d. Coordination of the participation of graduate medical education programs
- e. Coordination of the participation and resources of community hospitals, clinics, medical foundations, and pharmaceutical stakeholders.

Board Recommendation A-5

Resolution 22-113 End the Monopoly on Certifying Physicians by the American Board of Medical Specialties

Board of Governors Recommendation: [That substitute language be adopted in lieu of original Resolution 22-113](#)

House Action: [Adopted Board of Governors Recommendation](#)

RESOLVED, That the FMA support legislation to amend Florida Statute Section 458.3312 to allow physicians that have received initial recognition by the American Board of Medical Specialties as a board-certified specialist to continue to advertise as such regardless of whether the certification is maintained in the future.

Board Recommendation B-1 Chapter VI, Section 3. Meetings

Board of Governors Recommendation: [That the FMA Bylaws be amended to eliminate the President's Advisory Committee](#)



House Action: Adopted the Board of Governors Recommendation to amend the FMA Bylaws

Section 3. MEETINGS

The Board shall meet upon call by the President. There shall be a minimum of three meetings in each administrative year, in addition to a Board development retreat that may take place as determined by the Board. The President shall call a special meeting upon his/her determination that a special meeting is necessary or upon the written request of at least twenty-five percent of the voting members of the Board.

~~In addition to the Board meetings, the President may hold advisory group meetings throughout the year at his/her discretion. These meetings, when feasible, shall be conducted in conjunction with FMA Board of Governor meetings, AMA meetings, or other meetings or events in which the FMA Officers will be present. Advisory group meetings shall consist of FMA Officers, FMA CEO and key senior staff, and other individuals invited at the discretion of the President. Advisory group meetings are for the purpose of discussing operational and strategic issues, and no votes shall be taken.~~

Board Recommendation B-2 Chapter III, Section 5. Determination of Delegates

Board of Governors Recommendation: That the FMA Bylaws be amended to provide that each county that does not have an active chartered county medical society or that does not participate in a regional county medical society be allowed to send delegates to the FMA House of Delegates in a manner prescribed by the Board of Governors

House Action: Adopted the Board of Governors Recommendation to amend the FMA Bylaws

Section 5. DETERMINATION OF DELEGATES

Commencing with the annual meeting of the House of Delegates to be held in 2003 and continuing with the House of Delegates meeting to be held each year thereafter, delegates and alternate delegates to the House of Delegates shall be selected by the component societies in accordance with the procedures set forth in this Section 5.

Each chartered county medical society shall be entitled to select annually and to send to each meeting of the House of Delegates one delegate for every forty active members of the Association within that society, and one for any fraction over and above the last complete unit of forty, as shown on the Association's records on December 31 of the preceding calendar year, provided that each component society holding a charter from the Association shall be entitled to at least one delegate.



The officers of the Association and the elected members of the Board of Governors shall be delegates to the House of Delegates and shall not be considered when determining the number of delegates to which a chartered county medical society is entitled.

Each specialty society and each representative society recognized by the FMA shall be entitled to select annually and send to each meeting of the House of Delegates one delegate for every forty active members, or any fraction thereof, of the specialty society or representative society who are members of the Association who shall be entitled to vote. Each delegate must be an active member of the Association.

Each county in Florida that does not have an active chartered component medical society and that does not participate in a regional county medical society shall be entitled to select annually and send to each meeting of the House of Delegates one delegate for every forty active members of the FMA who reside or practice in that county. The process for determining the selection of delegates for each unrepresented county shall be determined by the FMA Board of Governors.

The Specialty Society Section, the Young Physicians Section and the Florida Medical Association Alliance shall be entitled to select annually and send to each meeting of the House of Delegates one delegate who shall be entitled to vote. The Resident and Fellow Section shall be entitled to select annually and send to each meeting of the House of Delegates four delegates who shall be entitled to vote. The Medical Student Section shall be entitled to select one delegate from each medical school in the state of Florida, who shall be entitled to vote. No delegate may represent more than one organization entitled to representation in the House of Delegates.

The House of Delegates shall have the power to determine its own membership and by three fourths vote of those delegates present in official session refuse to seat any delegate or alternate delegate.

Board Recommendation B-3

Chapter IX, Section 1, Component Societies Defined and Section 2, Chartered County Medical Societies

Board of Governors Recommendation: That the FMA Bylaws be amended to conform current practice regarding the formation of regional county medical associations with current practice and ensure that any regional associations formed must be done so with the consent of all existing active county medical associations

House Action: Adopted the Board of Governors Recommendation to amend the FMA Bylaws

Section 1. COMPONENT SOCIETIES DEFINED

The component societies of the Association shall include all of the chartered county medical societies, the specialty societies recognized by the Association, and other representative societies as recognized by the Board of Governors.



Section 2. CHARTERED COUNTY MEDICAL SOCIETIES

The chartered county medical societies of the Association shall be all of the county medical societies now chartered by the Association and those that hereafter may be organized and chartered by the Association which have adopted Constitutions and Bylaws or have been incorporated with Bylaws not in conflict with the articles of Incorporation and the Bylaws of the Association.

Charters shall be issued by the House of Delegates upon recommendation of the Council on Ethical and Judicial Affairs. The House of Delegates shall have authority to remove the Charter issued to any chartered county medical society whose actions are in conflict with the letter or spirit of these Bylaws or of the Articles of Incorporation of the Association. Policies adopted by the Florida Medical Association's House of Delegates shall be binding upon the chartered county medical societies and their members.

A copy of the Constitution and Bylaws, or of the Corporate Charter and Bylaws, of each chartered county medical society shall be filed in the Executive Office of the Association, and the Association shall be notified promptly of any changes therein.

Only one chartered county medical society shall be chartered in any county. Physicians in counties with or without a chartered medical society ~~having few physicians~~ may, upon mutual agreement, join with physicians in adjacent counties in the formation of a combined society which shall have all the rights, privileges, duties, responsibilities and obligations of a society composed of physicians of only one county. All active county medical societies in the counties involved must agree to the formation of the combined society.



Resolution 23-101
Protection of Physicians from Criminalization of Standards of Medical Care
Collier County Medical Society

House Action: **Adopted as amended**

~~RESOLVED, That the FMA make an investment in a defense fund to assist physicians who are endangered by criminal charges, sanctions or other civil causes of action that infringe on their legitimate practice of medicine in a matter consistent with the standards of care upheld by any ABMS recognized specialty board or nationally recognized specialty college, academy, or association that sponsors continuing medical education needed for maintenance of certification or licensure; be it further~~

RESOLVED, That the FMA recognizes the rightful autonomy of physicians to serve the interests of their patients by communicating, educating, counseling, or treating their patients in a matter consistent with the standards of care. ~~upheld by any ABMS recognized specialty board or nationally recognized specialty college, academy, or association that sponsors continuing medical education needed for maintenance of certification or licensure; be it further~~

RESOLVED, That the HOD reaffirms by incorporation the existing policies:

- ~~P105.002 — CRIMINAL PENALTIES FOR NEGLIGENCE;~~
- ~~P 105.003 — DECRIMINALIZATION OF MEDICAL DECISIONS;~~
- ~~P 105.004 — PROHIBITION OF CRIMINAL PROSECUTION LEGISLATION; and~~
- ~~P 400.012 — FREEDOM TO PRACTICE EVIDENCE-BASED MEDICINE.~~

Resolution 23-102
Defining Specialty Certification for Physicians
Hillsborough County Medical Association

House Action: **Not adopted**

RESOLVED, That our Florida Medical Association (FMA) adopt a policy for Medical Specialty Board Certification Standards that aligns with American Medical Association policy. The FMA will:

- (1) Oppose any action, regardless of intent, that appears likely to confuse the public about the unique credentials of American Board of Medical Specialties (ABMS) or American Osteopathic Association Bureau of Osteopathic Specialists (AOA-BOS) board certified



physicians or takes advantage of the prestige of any medical specialty for purposes contrary to the public good and safety.

- (2) Oppose any action, regardless of intent, by organizations providing board certification for non-physicians that appears likely to confuse the public about the unique credentials of medical specialty board certification or takes advantage of the prestige of medical specialty board certification for purposes contrary to the public good and safety.
- (3) Support that when the equivalency of non-ABMS and non-BOA-BOS certification is being considered, the certification program must meet industry standards for certification that minimally include both 1) a process for defining specialty-specific standards for knowledge and skills and 2) offer an independent assessment of knowledge and skills for both initial certification and recertification in the medical specialty. Accepted national standards, such as the Essentials for Approval of Examining Boards in Medical Specialties³, will be utilized for that determination.
- (4) Oppose discrimination against physicians based solely on lack of ABMS or BOA-BOS board certification, or where board certification is used as the sole criteria considered for purposes of measuring quality of care, determining eligibility to contract with managed care entities, eligibility to receive hospital staff or other clinical privileges, ascertaining competence to practice medicine, or for other purposes. Our FMA opposes discrimination against non-certified physicians who are in a clinical practice for the required period of time that must be completed prior to taking a specialty board certifying examination.

Resolution 23-104

Fraudulent Nursing Diplomas

South Florida Caucus, Florida Chapter Division of the American Academy of Emergency Medicine, Florida College of Emergency Physicians

House Action: Adopted as amended

RESOLVED, That the FMA **supports the revocation of** ~~petition the Attorney General of the State of Florida to revoke~~ the licenses of those nurses with fraudulent diplomas who are currently practicing in Florida **and will continue to monitor the revocation of fraudulent nursing licenses.** ~~consistent with the actions of other states; and be it further,~~

~~RESOLVED, That the FMA will petition the Attorney General of the State of Florida to identify how many nurses with fake diplomas are working as nurse practitioners.~~



Resolution 23-105
Protecting Access to Reproductive Health
American College of Obstetrics and Gynecology District XII

House Action: Referred to the Board of Governors for decision

RESOLVED, The Florida Medical Association rescinds FMA Policies P 5.001-P 5.004 and replaces them with the following:

The Florida Medical Association

1. Opposes limitations on access to evidence-based reproductive health services, including fertility treatments, contraception, and abortion;
2. Will work with interested medical specialty societies to vigorously advocate for broad, equitable access to reproductive health services, including fertility treatments, fertility preservation, contraception, and abortion;
3. 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 reproductive health services.

Resolution 23-106
Ensuring Affordable Housing for Trainees in Graduate Medical Education Programs
Resident and Fellow Section

House Action: Adopted as amended

RESOLVED, The FMA should encourage Graduate Medical Education (GME) training programs to increase support trainees' pay to reflect match the raise in the local cost of living. Trainee salary should be sufficient enough to ensure that the average one-bedroom apartment is no more than approximately 30% of a trainees' salary after taxes. Additionally, all GME programs should provide additional stipends for food and other utilities to offset the rise in the cost of living.

Resolution 23-108/ Resolution 23-117
Addressing Physician Suicides and Shortages/ Recognizing Physician Suicide as a Public Health Concern
Steven Reid, M.D./ Medical Student Section

House Action: Substitute language adopted in lieu of Resolution 22-108 and Resolution 22-117



RESOLVED, That our Florida Medical Association recognizes physician suicide as a public health concern; and be it further

RESOLVED, That our Florida Medical Association encourages hospitals in Florida to continue to develop and educate their physicians on available mental health resources; be it further

RESOLVED, That our Florida Medical Association supports legislation to promote the development and implementation of suicide prevention interventions for Florida physicians; be it further

RESOLVED, That the Florida Medical Association study the issue of physician suicide and recommend such programs (research, training, legislative, and interventional) and requisite funding to mitigate this issue faced by physicians, residents, and students.

Resolution 23-109
Training in Graduate Medical Education Programs
Resident and Fellow Section

House Action: Referred to the Board of Governors of decision

RESOLVED, Resident and fellow physicians in Graduate Medical Education programs may only be supervised and trained by senior resident and fellow physicians, (commensurate with their level of training) or attending physicians. Commensurate with their level of training, resident and fellow physicians may only be compelled to train medical students, resident physicians, and fellow physicians.

Resolution 23-110
Firearm Safety Signage
Northeast Florida Delegation

House Action: Referred to the Board of Governors for decision

RESOLVED, The FMA will inform its members on Florida law concerning firearms in medical offices and on how to make their practices gun-free zones in a manner that abides with Florida laws if they so desire; and be it further

RESOLVED, The FMA will identify or design appropriate firearm safety signage that physicians can display in their offices.



Resolution 23-111

Rescind Resolution 21-105

Jon Ward, M.D., Emerald Coast Medical Association

House Action: Referred to the Board of Governors for decision

RESOLVED, The FMA rescind Resolution 21-105; be it further

RESOLVED, The FMA recognize that natural immunity exists and that prior infection with a virus is equivalent or superior to a vaccine.

Resolution 23-112

Ban All Covid Vaccines in the State of Florida

William Warrick III, M.D.

House Action: **Not adopted**

RESOLVED, That all COVID vaccines be banned throughout the State of Florida because they don't work; and be it further

RESOLVED, That membership in the World Health Organization must be ended permanently now because we are signed up to be placed under a world medical dictatorship by the WHO that can impose border closures, lockdowns, vaccines, and vaccine passports.

Resolution 23-113

Right of Physicians to Follow their Conscience

Dade County Medical Association, Broward County Medical Association

House Action: Referred to the Board of Governors for decision

RESOLVED, The Florida Medical Association (FMA) censures any organization that attempts to rescind the board certification or clinical privileges of any physician who exercises their conscience rights; and be it further

RESOLVED, The FMA insists the Florida Board of Medicine select alternative board certification organizations that do not infringe upon physician conscience rights if any board certification organization currently recognized by the Board is found to have violated these conscience rights.

Resolution 23-114

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National Standard of Care
South Florida Caucus

House Action: Not adopted

RESOLVED, The Florida Medical Association acknowledges that the standard of care, which physicians provide for the well-being of their patients, has a national scope and should not be divided into state-specific standards; and be it further

RESOLVED, The Florida Medical Association opposes criminalization, liability or censure of physicians for following the national standards of care.

Resolution 23-115
Sunshine in the Department of Health
South Florida Caucus

House Action: Adopted

RESOLVED, The FMA formally requests a detailed description of the process and criteria used by the DOH for recognizing board certification, office surgery, and health care organization credentialing organizations from the State Surgeon General; and be it further

RESOLVED, The FMA will make the description of this process and criteria publicly available for comment by physicians on its website.

Resolution 23-116
Fertility and Reproductive Health Education for Female Physicians
Medical Student Section

House Action: Adopted

RESOLVED, That our Florida Medical Association acknowledges the potential physical, financial, and emotional impacts of physician infertility; and be it further

RESOLVED, That our Florida Medical Association develops educational materials, including but not limited to emails, mail, and FMA website, to increase awareness and available resources on physician infertility.



Opposition of Conversion Therapy for Gender Dysphoria

Jon Ward, M.D., Emerald Coast Medical Society

House Action: Referred to the Board of Governors for study and report back

RESOLVED, The FMA reject the use of “gender affirming care” and encourage the use of the more appropriate terminology gender identity conversion therapy; be it further

RESOLVED, The FMA support the current position of the Florida Board of Medicine, the Florida Board of Osteopathic Medicine, and current Florida law to oppose the use of gender identity conversion therapy in children.

Resolution 23-119

Physician Effort to Place Abortion Amendment on the Ballot in 2024

Broward County Medical Association, Linda Kaplan, M.D.

House Action: Referred to the Board of Governors for decision

RESOLVED, The Florida Medical Association hereby encourage its membership and all physicians in the State of Florida to collect signatures for the Petition to put Abortion on the Ballot in 2024; and be it further

RESOLVED, The Florida Medical Association will publicize this Link so physicians and their staff may print Petition Forms.

Resolution 23-203

Addressing the Needs of Patients Impacted by Medication Shortages

Florida Society of Addiction Medicine

House Action: **Substitute language adopted**

RESOLVED , That the FMA support legislation that would insure safe access to opioid analgesic medications and medications to treat opioid use disorder; be it further

RESOLVED, That our FMA work with pharmaceutical companies, drug distributors, pharmacies and appropriate governmental entities to insure a transparent and adequate supply of opioid analgesic medications and access to medications to treat opioid use disorder.



Resolution 23-301
Liability Protection for Physicians Caring for Incarcerated People
Capital Medical Society

House Action: Adopted

RESOLVED, That the FMA supports legislation that would provide additional liability protection for physicians caring for incarcerated individuals.

Resolution 23-302
Preventing Messaging Only Services
Hillsborough County Medical Association

House Action: Adopted as amended

RESOLVED, That the FMA support legislation that would prevent ~~companies or physicians who practice~~ **entities who use** messaging-only care from practicing medicine in the state of Florida.

Resolution 23-303
Health Insurance Identification Transparency
Hillsborough County Medical Association

House Action: Adopted

RESOLVED, That the Florida Medical Association (FMA) support any legislation in Florida which calls for health insurance identification card transparency for consumers and which would also aid medical providers in identifying whether a health plan is state or federal plan.

Resolution 23-304
Repeal of Pharmacy Collaborative Practice Agreements
Florida Chapter American College of Cardiology

House Action: Adopted

RESOLVED, That the Florida Medical Association seek repeal of Florida Statute 465.1865.

Resolution 23-305
Corporate Practice of Medicine Prohibition



South Florida Caucus, Florida Chapter Division of the American Academy of Emergency Medicine and the Florida College of Emergency Physicians

House Action: Adopted

RESOLVED, That FMA will support legislation to limit ownership of physician practices to physicians only; and be it further

RESOLVED, that this can be accomplished by amending Florida Statutes Title XXXII Chapter 458 Medical Practice with a new section “Proprietorship by Non-physicians” (for any physician practice formed or sold after the effective date of the amended legislation) prohibiting any person (or entity) other than a physician (or group of physicians), hospital or university/medical school, licensed pursuant to Florida law from:

1. Employing a physician.
2. Directing, controlling, or interfering with a physician's clinical judgment.
3. Having any relationship with a physician which would allow the unlicensed to exercise control over:
 - a. The selection of a course of treatment for a patient; the procedures or materials to be used as part of such course of treatment; and the way such course of treatment is carried out by the licensee.
 - b. The patient records of a physician.
 - c. Policies and decisions relating to billing, credit, refunds, and advertising; and
 - d. decisions relating to the physician or non-physician staffing, office personnel and hours of practice; and be it further

RESOLVED, That the Florida Medical Association bring a resolution to the American Medical Association at the next meeting to seek similar legislation or regulation, prohibiting the corporate practice of medicine at a federal level.

Resolution 23-306

Staffing Ratios in the Emergency Department

South Florida Caucus, Florida Chapter Division of the American Academy of Emergency Medicine and the Florida College of Emergency Physicians

House Action: Adopted as amended

RESOLVED, That the FMA seek **support** legislation to ensure the adequate supervision of non-physician practitioners (NPPs) in the emergency department by requiring that the supervising physician may only supervise 2 (two) NPPs at a time, to provide true supervision and appropriate



care to the emergency patient. At any given time, there cannot be a ratio exceeding 1:2 of real-time and on-site physicians to NPPs working in the emergency department; and be it further

RESOLVED, That the Florida Medical Association bring a resolution to the American Medical Association at the next meeting to seek similar federal legislation or regulation, prohibiting staffing ratios that do not allow for proper supervision of NPPs in the Emergency Department; and be it further

RESOLVED, That the Florida Medical Association bring a resolution to the American Medical Association at the next meeting to seek similar federal legislation or regulation, that would require all Emergency Departments to be staffed 24-7 by a qualified physician.

Resolution 23-307

NICA Transparency and Reform

Palm Beach County Medical Society, Florida Chapter Division of the American Academy of Emergency Medicine and the Florida College of Emergency Physicians

House Action: Not adopted

RESOLVED, That FMA amend policy P 335.006 EXPANDED RESOURCE BASE FOR NICA to: “will seek legislation” to require independently practicing nurse practitioners (NPs) and independent certified nurse midwives (CNMs) to pay the requisite annual NICA program fee; and be it further

RESOLVED, That the FMA reports to the House of Delegates a review of the most recent NICA audits regarding the appropriateness of the allocation of monies towards administrative and legal fees versus actual payments to patients and the potential impact of additional fees of independent NPs and CNMs.

Resolution 23-308

Provision of Immigrant Healthcare

Alachua County Medical Society

House Action: Referred to the Board of Governors for study and report back

RESOLVED, That the Florida Medical Association will continue to affirm, defend, and refrain from a position of passive neutrality the administration of medical care to any individual, irrespective of his/her nation of origin or immigration status; and be it further



RESOLVED, That the Florida Medical Association will support legislation that reduces immigrants' barriers to care, to promote improved public health and prevent individual deleterious health consequences.

Resolution 23-309
Vaccine Exemption Authorizations
Northeast Delegation

House Action: Adopted

RESOLVED, That the Florida Medical Association support legislation to amend Florida law to prohibit chiropractors from signing off on vaccine exemptions.

Resolution 23-111
Delta 8-THC
South Florida Caucus

House Action: Adopted

RESOLVED, That the FMA support legislative and/or regulatory efforts prohibiting the sale or distribution of delta-8-THC in Florida, while still allowing opportunity for proper scientific research.

Resolution 23-312
Transparency and Accountability in Care Delivery
Dade County Medical Association, Broward County Medical Association

House Action: Adopted

RESOLVED, That the FMA revise the existing policy P 360.007. Transparency of Care, to require non-physician providers that are working under General Supervision to also secure written informed consent acknowledging they are rendering care without direct physician oversight.

P 360.007 TRANSPARENCY OF CARE

The Florida Medical Association will seek legislation requiring independent non-physician practitioners without physician supervision to provide notice to patients through the posting of signage in waiting rooms and public areas in their work setting that the practitioner does not have a physician's oversight of the patient's care; and be it further, the Florida Medical Association seek legislation that requires non-physician providers that are working independently **or under General Supervision** to secure written informed



consent from patients that they understand that they are being assessed and treated by non-physician providers practicing without **direct** physician oversight. (Amended Res 21-307, HOD 2021)

RESOLVED, That the FMA support legislation that amends the adverse event reporting requirements in the Florida Statutes for all clinicians and settings requiring disclosure of the clinician who was delivering care at the time the adverse event occurred and whether the supervising physician was providing direct or general supervision.

Resolution 23-313

Verification that Autonomous Practice Nurses are Having the Intended Impact

South Florida Caucus

House Action: **Adopted as amended**

RESOLVED, That the FMA create a report using publicly available data from the Board of Nursing identifying the practice location of all advanced practice registered nurses that are working in autonomous practices as established by Florida Statute 464.0123; and be it further,

RESOLVED, That the FMA seek legislation that would amend Florida Statute 464.0123, Autonomous practice by an advanced practice registered nurse, to restrict the practice of autonomous advanced practice registered nurses to those areas that qualify as medically underserved communities **and provide only medically necessary care.**

Resolution 23-314

Clarifying and Defining the Roles of Healthcare Providers in Spanish

Medical Student Section

House Action: Referred to the Board of Governors for decision

RESOLVED, That our Florida Medical Association supports legislation that clearly delineates each healthcare worker's title in Spanish. Suggested language includes; NPs to be termed "Enfermero/a Practicante/a" and PAs to be termed "Asistente medico".

Resolution 23-315

Healthcare Worker Opt-Out

Medical Student Section

House Action: **Adopted**



RESOLVED, That our Florida Medical Association support legislation to allow physicians the option to opt out of their private information from being available in the public domain, including but not limited to; phone number, email address, and home address.

Resolution 23-316
Direct Access by Child Abuse Pediatricians to Patient Care
Daniel Thimann, M.D.

House Action: Adopted as amended

RESOLVED, That the Florida Medical Association support legislation to ~~allows for~~ **allow** Child Abuse Pediatricians to be directly consulted by hospital medical teams **concurrently with statutorily required DCF notification.** ~~without necessitating DCF involvement or case number.~~

Resolution 23-401
Fixing Independent Dispute Resolution
Hillsborough County Medical Society

House Action: Adopted

RESOLVED, that our Florida Medical Association seek legislation which would:

1. Close the Independent Dispute Resolution (IDR) opt-out loophole & require all Florida health plans that are challenged by physician groups or hospitals to enter IDR arbitration and to accept the final IDR ruling; and
2. Make all IDR decisions binding and prospectively applied so that health insurance plans cannot continue to under-reimburse physicians.

Resolution 23-402
Mental Health Screening and Integrated Medical Health Care
Fl. Ch. American Academy of Pediatrics

House Action: Adopted as amended

RESOLVED, That our FMA advocate **that** Medicaid and private insurers reimburse physicians for mental health screeners **performed** ~~done in outpatient visits~~ inclusive but not exclusive to postpartum depression screening, PH-Q, anxiety screening; and be it further



RESOLVED, That our FMA advocate for reimbursement rates for psychologists and/or social workers to be at a competitive rate for seeing patients at the primary care office, promoting the integrated medical mental health model; and be it further

RESOLVED, That our FMA supports the integrated medical mental health model, acknowledging the utility in employing mental health workers, such as psychologists and social workers, to strengthen the services provided within the medical home.

RESOLVED, Our FMA reaffirms policies P330.002 Mental Health Parity and P380.009 Mental Health Care in the Primary Care Setting.

Resolution 23-403

Allowing Businesses of One Employee to Come Together to Negotiate for Affordable Health Insurance
Northeast Florida Delegation

House Action: Adopted as amended

RESOLVED, The Florida Medical Association study and report back the feasibility to pursue legislation to allow businesses of one employee to come together and collective bargain for affordable health insurance premiums; and be it further

RESOLVED, that the FMA reach out to other interested and affected parties to help facilitate this study and acquire additional information.

Resolution 23-404

Decentralize the Funds (Royalties) Generated by the Mandatory Use of CPT Codes from the American Medical Association to State Medical Societies

Ellen McKnight, M.D.

House Action: Adopted as amended with title change

Request FMA Review of AMA CPT Code Royalties

RESOLVED, That the Florida Medical Association (FMA) work with all willing state medical societies/associations to conduct a immediate timely review of the current arrangement between the AMA and any 3rd parties regarding CPT coding royalties, including discovering and reviewing all governing federal statutes and regulations; and conduct a review of how the money received from CPT codes are spent.



RESOLVED, That the FMA provide the results of this review to its members at the next annual meeting.

~~RESOLVED, That the FMA work with all willing state medical societies/ associations to procure the equitable distribution of CPT coding revenues among state medical societies; further be it~~

~~RESOLVED, That our FMA, upon procuring these funds, establish an elected board/committee dedicated to:~~

- ~~1) Providing a transparent accounting of how the funds generated by CPT code royalties would be used; and~~
- ~~2) Will actively solicit the opinions from the FMA membership as to how best to use these funds and shall prepare quarterly reports for the membership accounting for the use of said funds.~~

Resolution 23-405
Medicaid Patient Accountability
South Florida Caucus

House Action: Adopted

RESOLVED, That the FMA Board of Governors study the issue of how to account for non-compliant patients and those taking religious exemptions from treatment in Healthcare Effectiveness Data and Information Set (HEDIS) measures used to evaluate and compensate physicians for quality care; be it further

RESOLVED, That the Delegation to the AMA propose a resolution for the AMA to pursue mechanisms for patient non-compliance and religious exemptions to be accounted for and exempted from Healthcare Effectiveness Data and Information Set (HEDIS) measures used to evaluate the quality and effectiveness of physician care.

Resolution 23-406
Non-Emergent Treatment of Patients in an Outpatient Environment
South Florida Caucus

House Action: Referred to the Board of Governors for study and report back

RESOLVED, That the FMA support legislation that will restore free-market principles and patient responsibility to health care delivery in the State of Florida through the following measures:



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1. Eliminate closed panels by insurance carriers enabling patients to choose any willing provider for the medical services they seek and require;
2. Requires insurance carriers to provide their insureds a detailed overview of the insurance benefit they are purchasing that details the allowable amount the policy will reimburse specific medical services and the manner in which all out-of-pocket payments will be applied to any patient responsibility requirements;
3. Requires facilities and health care practitioners to provide all charges for non-emergent medical services to patients electronically or in print before the patient chooses to proceed with the care;
4. Eliminate the balance billing prohibition in the Health Maintenance Organization insurance statutes in the state, thereby restoring the freedom for patients to pay for health care services in excess of the reimbursement allowable included in their insurance policy.

Resolution 23-407

Support for Collective Bargaining for Physicians in Training Medical Student Section

House Action: Not adopted

RESOLVED, That our Florida Medical Association support the development and operation of local negotiating units as an option for all resident and fellow physicians authorized to organize labor organizations under the National Labor Relations Act; and be it further

RESOLVED, That our Florida Medical Association will work with other organizations and stakeholders to promote greater awareness and understanding of the benefits of collective bargaining for physicians in training and the healthcare system as a whole.