The majority of the AMA policy debate continues to be the response to the Patient Protection and Affordable Care Act (PPACA) and the AMA focus on amending the act to accomplish the AMA goals of insurance coverage for all while at the same time reinforcing individual responsibility, tort reform, Medicare payment reform, antitrust reform, and expansion of health savings accounts.

While there were no major resolutions that affect AADEP significantly, two particular resolutions are worth noting. CEJA Report 1 that dealt with AMA policy on the relationship of individual physicians and commercial entities in continuing medical education was finally passed after its fifth iteration. While somewhat controversial in that the report is not totally in concert with ACCME recommendations in this area, the focus of the AMA policy is that whenever possible, CME activities should be financed without commercial support. When that is not feasible, the AMA policy indicates that there should be no commercial influence upon the CME activity.

The second resolution worth monitoring concerns the issue of expert witness testimony in medical liability cases. AMA Policy now states that physicians should comply with expert witness certification processes in each state as each state law dictates, and that physicians may be subject to state medical board sanctions from either their licensing state or the certificate issuing state if fraudulent or inaccurate testimony is given.

I asked for the AADEP Board’s endorsement of the candidacy of Albert Osbahr, MD for the position of AMA Board Trustee, a physician from North Carolina who practices both family medicine and occupational medicine, and who I know also has as part of his practice a small disability evaluation component. I am happy to report that Dr. Osbahr was successful in the election.

Respectfully submitted:

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AMA Delegate to 2011 Annual Meeting