

2020 Congress of Delegates Proposed Resolutions								
ORGANIZATION AND FINANCE								
Sponsor	Resolution #	Fiscal Impact	Title	Description	Support	Oppose	Neutral	
North Carolina, Florida, Connecticut, West Virginia, Kentucky, Wisconsin, Tennessee, and North Dakota	201	None	Provide Better Operational Efficiency by Focusing on Member Strategic Priorities	RESOLVED, That the American Academy of Family Physicians (AAFP) require all resolutions submitted to the Congress of Delegates in 2021 and 2022 (whether submitted by a chapter or an individual) to include the following: A review of existing AAFP policy and past action by the Congress of Delegates prior to submitting the resolution; Information indicating how the resolution aligns with the AAFP Strategic Plan and their Chapter Strategic Plan (if applicable); A review of how the resolution aligns with the most recent national or chapter member needs assessment/surveys; Encourage review and support by at least three chapters (submitting chapter and two co-sponsors) to ensure that the issue is broader than a one-chapter issue, and be it further RESOLVED, That the American Academy of Family Physicians ask each chapter to voluntarily make every effort to limit the number of resolutions to a maximum of three focused on key priorities, and be it further RESOLVED, That the American Academy of Family Physicians Board of Directors review the impact of the limit on resolutions during the 2020 Special Meeting of the Congress of Delegates and the 2021 Congress of Delegates (if adopted) and bring back recommendations regarding whether to make the requirements of this resolution permanent.		Oppose		
South Carolina	202	None	Reaffirming the Role of the Congress Of Delegates in Setting AAFP Policy During the Covid-19 Public Health Emergency	RESOLVED, That this Congress affirm its sole prerogative under the AAFP Bylaws to solicit, receive, hear testimony on, debate, and vote on any resolution that is pertinent to the objectives and mission statement of the AAFP, and be it further RESOLVED, That the Congress adopt standing rules for electronic meetings that are consistent with the requirements of the Bylaws and parliamentary authority, and be it further RESOLVED, That these standing rules for electronic meetings provide for the full execution of the business of the Congress of Delegates without restrictions on the rights of members to submit resolutions, the number of resolutions submitted, nor the subject matter addressed therein.	Support			
PRACTICE ENHANCEMENT								

Hawaii	301	\$46,241.00	Developing Primary Care Technology Standards of Ethics and Equity	RESOLVED, That the American Academy of Family Physicians (AAFP) will create a set of principles to address ethical standards in primary care technologies to apply to companies selected for partnership by the AAFP innovation lab and that these standards will address data collection, anti-bias algorithms, equitable access/agility for use by smaller physician practices, technological transparency, AAFP financial involvement, patient privacy, and any other topic deemed appropriate by members of the AAFP, and be it further RESOLVED, That the American Academy of Family Physicians involve members in creating this set of ethical standards and principles, (example: virtual cross commission working group), to address questions such as 1) How to prevent the commodification of primary care through tech to protect the specialty of Family Medicine; 2) How to humanize technology within the scope of primary care; 3) How tech companies should work with primary care; and 4) What is the relationship of the AAFP with the tech industry, and be it further RESOLVED, That the American Academy of Family Physicians present a report on the creation of a set of principles to address ethical standards in primary care technologies to the 2021 Congress of Delegates.	Support		
Utah	302	\$25,000.00	Increasing the Implementation of Prescription Cancellation Functionality of Electronic Health Records For Outpatient Practices	RESOLVED, That the American Academy of Family Physicians request regional and national pharmacy chains collaborate with physician practices to enable prescription cancellation functionality, and be it further RESOLVED, That the American Academy of Family Physicians educate members through articles, toolkits, and other forms of educational campaigns on the potential benefits of prescription cancellation functionality of their EHR, and be it further RESOLVED, That the American Academy of Family Physicians support engagement of members with their pharmacies to implement prescription cancellation functionality, and be it further RESOLVED, That the American Academy of Family Physicians request electronic health record vendors collaborate with physician practices to enable prescription cancellation functionality.	Support		

Michigan	303	None	Enabling All Patients Access to Pharmacy Services	<p>RESOLVED, That the American Academy of Family Physicians work with all licensing bodies and boards to prohibit any and all pharmacies and pharmacy chains, or any deliverer of medical care, services, and/or medications, from, in any way, preventing prescriptions hand-written by physicians or other healthcare providers for medication or other medical services or products from being filled at the patient's desired pharmacy or other health care deliverer, and be it further RESOLVED, That the American Academy of Family Physicians work with Congress, the Centers for Medicare and Medicaid Services, and all appropriate licensing bodies and boards to prohibit any and all pharmacies and pharmacy chains, or any deliverer of medical care, services, and/or medications, from, in any way, preventing prescriptions hand-written by physicians or other healthcare providers for medication or other medical services or products from being filled at the patient's desired pharmacy or other health care deliverer.</p>	Support		
Idaho	304	None	Telehealth Deregulation, Patient Safety and Payment Parity	<p>RESOLVED, That the American Academy of Family Physicians advocate with the Center for Medicare and Medicaid Services and commercial insurance providers to make permanent the telehealth coverage and payment policies enacted during the Public Health Emergency including allowing consent at time of service, allowing Rural Health Clinics and Federally Qualified Health Centers as distant site providers, removing the rural geographic restriction, and including telehealth codes in the list of services that count toward Hierarchical Condition Category scores, and be it further RESOLVED, That the American Academy of Family Physicians advocate to the Centers for Medicare and Medicaid Services and commercial insurance providers to cover site of service payment parity for telehealth Evaluation and Management services on par with established patient office visits of comparable length, and be it further RESOLVED, That the American Academy of Family Physicians advocate to the Centers for Medicare and Medicaid Services and commercial insurance providers that when audio-only visits are provided in lieu of in-person or telehealth visits when both are not available or advisable, they also be covered at parity with Evaluation and Management services on par with established patient office visits of comparable length, and be it further RESOLVED, That the American Academy of Family Physicians advocate to the Centers for Medicare and Medicaid Services and commercial insurance providers to standardize eligible patient originating and distant sites of service to include home and various work settings in order to deregulate telehealth and telephone services to provide high quality, safe and timely patient care.</p>	Support		

Michigan, Minnesota	305	None	Ensure Proper Telehealth Payments	RESOLVED, That the American Academy of Family Physicians promote and support permanent parity in payment for in-person and virtual visits to decrease exposure to communicable and contagious disease among patients, family physicians, and their healthcare teams, and be it further RESOLVED, That the American Academy of Family Physicians advocate for permanent parity in payment from insurers/payers for in-person and virtual visits, including telephonic, to increase access to care for patients of all socioeconomic levels and geographic areas, and to decrease the burden of preventable hospital admissions, therefore improving health outcomes and saving overall healthcare costs.	Support		
HEALTH OF THE PUBLIC & SCIENCE							
Vermont	401	None	Driving, Good Samaritan Proposal	RESOLVED, That the American Academy of Family Physicians support medical providers having ongoing discussions with their patients and their patient's families about safe driving practices, and be it further RESOLVED, That the American Academy of Family Physicians support healthcare providers who have severe concerns about public safety due to older driver impairments, and the driver has refused to voluntarily stop or appropriately limit driving, to make report to the appropriate state licensing authority, and be it further RESOLVED, That the American Academy of Family Physicians support legislation that conveys indemnity protections against any liability claims against healthcare providers who have made good faith reporting of impairment concerns to the appropriate state licensing authority.	Support		
Kansas	402	None	AAFP Position on Medical Aid in Dying/Physician Assisted Suicide	RESOLVED, That the American Academy of Family Physicians adopt a position of opposition to medical aid in dying/physician assisted suicide.		Oppose	
Minnesota B	403	None	Intimate Partner Violence	RESOLVED, That the American Academy of Family Physicians recommend universal screening for all adolescents and adults for intimate partner violence, and be it further RESOLVED, That the American Academy of Family Physicians advocate for relaxed quarantine and stay-at-home measures during a pandemic when the home is unsafe and advocate for emergency warning systems (such as code words or signs) within essential public service areas such as pharmacies and grocery stores to enable victims to indicate they are in danger and need support.			
Colorado, Oregon	404	None	Climate Change Policy	RESOLVED, That the American Academy of Family Physicians develop a position paper on climate change and health, incorporating scientific consensus and policy solutions, to guide internal actions and drive external advocacy.	Support		

Massachusetts	405	None	End Police Brutality and Reinvest in Public Health	RESOLVED, That the American Academy of Family Physicians support the federal reallocation of police funds for health care and community resources including schools, childcare and youth programs, mental health and counseling services, safe and affordable housing, fair wages, food pantries, and specialized case worker, and be it further RESOLVED, That the American Academy of Family Physicians support ending the qualified immunity doctrine in federal law which prevents police from being held accountable when they violate the constitutional rights of citizens, and be it further RESOLVED, That the American Academy of Family Physicians support investment in research evaluating the public health effects of police violence on communities of color, and be it further RESOLVED, That the American Academy of Family Physicians provide advice and assistance to chapters seeking to develop policy, advocate, and lobby for local and state legislation that supports divesting in police and re-investing in community resources, including schools, childcare and youth programs, safe and affordable housing, fair wages, food pantries, specialized case workers and first responders, mental health workers and counseling services, reentry programs and diversion programs, and other social services, and be it further RESOLVED, That the American Academy of Family Physicians provide advice and assistance to chapters seeking to promote regulations requiring police officers to actively report and intervene during instances of excessive force, and be it further RESOLVED, That the American Academy of Family Physicians provide advice and assistance to chapters seeking to partner with local, grass-roots organizations who have been actively working on decarceration and abolition to create community-based public safety programs.			Neutral
California, New Mexico	406	\$18,750.00	Policing Standards and Reinvesting in Public Health	RESOLVED, That the American Academy of Family Physicians issue a position paper regarding standards of practice for policing, and appropriate level of funding for police in the protection of public safety and health.		Oppose	

Minnesota	407	\$25,000.00	End Race-Based Medicine	RESOLVED, That the American Academy of Family Physicians end the practice of using race as a proxy for biology or genetics in their educational events and literature, including phasing out educational materials that refer to race as a risk factor and removing terminology in training materials and publications that furthers this misuse and misunderstanding, and be it further RESOLVED, That the American Academy of Family Physicians (AAFP) create guidelines for speakers and contributors to AAFP sponsored educational events that provide guidance about using race, such as advising against the use of race as a proxy for genes and recommending that race be explicitly characterized as a social category when describing risk factors for disease, and be it further RESOLVED, That the American Academy of Family Physicians develop or collaborate with other organizations to provide education for members on the harms of using race as a proxy for genetic or biological risk and how to use race appropriately in medicine, as a marker of systemic, oppressive health inequities and social self-identity and not as a risk factor for disease, and be it further RESOLVED, That the American Academy of Family Physicians support the development of resources to assist members in critically evaluating their use of race in research and clinical practice, such as curriculum for undergraduate and graduate medical education and continuing medical education on ending race-based medicine.	Support		
Washington	408	None	Development of National Bureau for Firearm Safety	RESOLVED, That the American Academy of Family Physicians support the creation of a national bureau for firearm safety which would lead and coordinate a long-term, multidisciplinary, multifaceted campaign to reduce firearm injury and deaths based on proven public-health practices, employing sound research to understand causes, direct interventions, and study the effects of those interventions.	Support		
Maryland, Texas	409	\$125,000.00	Supporting Preparation of Family Physicians for Increased Patient Exposures to Adverse Childhood Experiences Due to COVID-19	RESOLVED, That the American Academy of Family Physicians identify, produce, and advocate for legislation that will fund evidence-based community programs and interventions aimed at preventing and reducing ACEs.			

Washington	410	\$25,000.00	Supporting the Provision of Gender-Affirming Health Care for Transgender Youth	RESOLVED, That the American Academy of Family Physicians research mature minor doctrines to create and disseminate education materials to its physician, resident and student members as it applies to providing health care to adolescents including the spectrum of gender-affirming medical services, and be it further RESOLVED, That the American Academy of Family Physicians encourage the Accreditation Council on Graduate Medical Education, through existing channels, to update family medicine residency program requirements to include age-appropriate, gender-related medical care training informed by transgender youth and adults, and be it further RESOLVED, That the American Academy of Family Physicians add gender-affirming medical health care to its existing policy on, "Adolescent Health Care, Confidentiality."			
New York	411	None	Close the US Detention Centers, Provide Humane Care to Migrants	RESOLVED, That the American Academy of Family Physicians issue a statement supporting immediate end of the use of detention of asylum seekers, to be replaced with proven and humane effective alternatives to detention.	Support		
California, New York, New Mexico	412	None	Improved Quality of Reproductive Healthcare for Incarcerated People	RESOLVED, That the American Academy of Family Physicians advocate for national policy that helps to improve reproductive healthcare for incarcerated or otherwise detained individuals, including non-directive options counseling and access to timely abortion if desired.			
ADVOCACY							
Texas	501	None	Reduce Regulatory Burdens Required by CMS and Joint Commission Inspections	RESOLVED, That the American Academy of Family Physicians collaborate with the American Hospital Association, the American Medical Group Association, or other similar entities to negotiate with the Centers for Medicare and Medicaid Services, the Joint Commission, state regulators, the Occupational and Safety and Health Administration, the Office of Civil Rights, Clinical Laboratory Improvement Amendments, and other entities to reduce regulatory burdens facing family physician practices due to regulatory requirements, and be it further RESOLVED, That the American Academy of Family Physicians advocate that national regulatory agencies such as the Joint Commission, Centers for Medicare and Medicaid Services, Office of Civil Rights, and the Occupational and Safety and Health Administration provide the research used to develop regulations, including statistical risk-of-harm and cost-benefit analysis.	Support		

New Jersey	502	None	Mandatory Vaccine Notification Communication Between Pharmacies and Primary Cary Physicians	RESOLVED, That the American Academy of Family Physicians advocate for mandatory notification of vaccination administration by vaccine providers excluding annual influenza vaccines (including pharmacies, hospitals, urgent care providers and other vaccine providers) to primary care providers by digital interface or fax/secure message.	Support		
New Mexico, Colorado	503	\$18,750.00	The AAFP Stands Against the System of Employer-Based Healthcare Coverage	RESOLVED, That the American Academy of Family Physicians support a system of universal healthcare coverage for all that does not, for any individual, tie healthcare coverage solely to employment.	Support		
Colorado	504	None	Support of a Health Care System Based in Foundational Primary Care That is Capable of Providing Health Care Equity, True Health Care Access, and Health Care as a Basic Human Right	RESOLVED, That the American Academy of Family Physicians conclude that a publicly funded universal health care system is the optimal system amongst those studied by the AAFP to equitably enable access to healthcare for all people.		Oppose	
New York	505	None	Single Payer/Improved Medicare for All - Now	RESOLVED, That the American Academy of Family Physicians acknowledge the acuity of need for single payer healthcare, and the imperative that our failed employer-based, multi-payer system be changed as soon as practicable, and be it further RESOLVED, That the American Academy of Family Physicians support single payer in the form of improved Medicare for all as the best way to provide universal, affordable healthcare for all Americans, and be it further RESOLVED, That the American Academy of Family Physicians advocate for single payer in the form of improved Medicare for all as one of its top advocacy and lobbying priorities due to the urgent and dire need for universal and affordable healthcare.		Oppose	
Massachusetts	506	None	Health Care for all Unity with American College of Physicians	RESOLVED, That the American Academy of Family Physicians align itself with the American College of Physicians in support of a single payer system or a regulated system that includes a public option.	Support		

South Carolina	507	None	Preserving Public Trust in Vaccines	RESOLVED, That the American Academy of Family Physicians advocate that COVID-19 vaccines be made widely available only after the Food and Drug Administration has fully evaluated the safety and efficacy data from completed phase 3 clinical trials, and be it further RESOLVED, That the American Academy of Family Physicians advocate that the Food and Drug Administration's review of COVID-19 vaccine candidates be as thorough as has been the case for previous vaccine candidates, and be it further RESOLVED, That the American Academy of Family Physicians advocate that data regarding the development of COVID-19 vaccine candidates be made public and that all Food and Drug Administration hearings on approving COVID-19 vaccines candidates be open to the public, and be it further RESOLVED, That the American Academy of Family Physicians advocate that communities of color and other communities subject to medical inequities be actively involved in the roll-out process once a vaccine is approved, and be it further RESOLVED, That the American Academy of Family Physicians advocate that COVID-19 vaccine distribution not be determined by ability to pay.	Support		
Pennsylvania	508	None	United and Clear Response Needed in Face of a Public Health Crisis	RESOLVED, That the American Academy of Family Physicians work with the federal government to ensure a united and clear response in the face of any public health crisis, based upon the best scientific evidence available, in order to improve health and mitigate morbidity and mortality.	Support		
Oregon	509	None	Support Deregulating Buprenorphine Administration - X the X Waiver	RESOLVED, That the American Academy of Family Physicians support deregulating Buprenorphine prescribing by removing the X waiver.	Support		