I have been a member of the AMA for most of my career but I had never attended a meeting of the House of Delegates. I went this year as part of the Lexington Medical Society group because I wanted to be there for Steve Stack’s inauguration as the 170th president and the youngest president in the last 160 years. I wanted to be there because I have come to know him in my role as ex officio chairman of the Emergency Medical Advisory Board and know of his interest in health care beyond his specialty. To get a sense of his broad based interest Google Steve Stack, Inaugural Address, AMA. You will find that this 43-year-old physician has wisdom beyond his years.

I went to Chicago for his inauguration but I came back with a great appreciation for the AMA leadership, what the AMA does, and why it matters to be part of organized medicine. I was able to be part of nearly everything Kentucky, the southern states and the House of Delegates, even though I was not a member of the house. The business processes are very transparent and the debates are spirited.

The first thing that struck me is that these men and women work really hard. They start at 7:00 a.m. and frequently go into the evening…and they don’t take breaks.

The second thing I noticed is that everyone is there—over 500 delegates, most of whom attend every House of Delegates and reference committee function. Each state has delegates based on its AMA membership but there are another 150 or so delegates from organizations as varied as the federal health services (DOD, PHS and VA), every clinical specialty, medical students, gay and lesbian medical association, and narrowly focused groups like the Heart Rhythm Society and the Society of Hair Restoration. Among those delegates and others I found one college fraternity brother who had served on the AMA board of trustees, several former Public Health Service officials holding important jobs in health care, and a physician who practices in the Texas town where my granddaughter will start college this fall. They are all there.

The third thing I noticed is the process. If all one reads is the summary statements on actions taken by the House of Delegates one will never know what happens when over 200 reports and resolutions go through the committee process. Those committees are the site of vigorous and animated debate and those debates address the very same concerns that get discussed in Lexington. Yes, they covered malpractice (a little), EMR (a lot), and ICD 10/11 (a lot more). But they also got into serious debate about tobacco use, protective headgear for women playing lacrosse, physician responsibilities, the high cost of generic drugs, health care reform, and the VA patient access issue. They also held serious debates about the best way to deal with legislative issues. Some delegates preferred that the AMA stand in opposition to many of the directives while others thought a more reasonable approach was to accept that change is inevitable and concentrate on how the House of Medicine can best influence the process.

We got some advice on how to influence the process from a physician who has been in congress for the last several years. He said that “no one cares about whether the doctor gets paid; people care about patient care and quality.” The take home message for me was that medicine needs be clearly recognized as part of the solution to the quality and access issues and less concerned about reimbursement issues. He also reinforced something we hear every time about working with legislators; a personal relationship with an elected official trumps donations, telephone calls, and letters and he suggested that we get involved with the political process if we want to be heard. He reminded us that it takes a long time to get things done in government (over 10 years for SGR relief) so we must be patient, persistent, and flexible.

By the end of the meeting, my belief that the best solutions come from considering many different perspectives before launching a program was confirmed. But what emerged as the dominant message, is that organized medicine and the
American Medical Association really represent the best way for the diversity of medical practice, medical education, and medical governance to develop positions that are in the best interest of the patient, the physician, and the society. I cannot imagine any other forum where the divergent views of 500 delegates representing the states and physician organizations would be so openly and passionately discussed. I am more convinced than ever that membership and participation in the activities of the Lexington Medical Society, the Kentucky Medical Association and the AMA are the best hope for physicians to be heard. I encourage those among us who are not members and who do not participate to join the society and engage in the debate, lest others who know less than you determine the course of medical care.

2 tickets to the Opera House to see 42nd Street on Saturday, July 25 @ 8pm.

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