

**WASHINGTON STATE MEDICAL ASSOCIATION  
OFFICIAL ACTIONS OF THE 2024 HOUSE OF DELEGATES**

**REFERENCE COMMITTEE B**

**BOARD OF TRUSTEES REPORTS**

**Report A – Auditor’s Report (FILED)**

**Report B – Secretary-Treasurer’s Report (FILED)**

**Report C – Status of 2023 Reports and Resolutions (REPORT FILED; STATUS OF REFERRALS BELOW)**

**B-4 (A-23) – Decarbonizing the US Health Sector (SUBSTITUTE RESOLUTION B-4 [A-23] ADOPTED IN LIEU OF RESOLUTION B-4 [A-23])**

**Authors: Mark Vossler, MD (KCMS) / Daniel Low, MD (KCMS)**

RESOLVED, that the WSMA urge its members, health care organizations in Washington, and affiliated stakeholders to take steps to align with the objectives, outcomes, milestones, and actions identified in the various stages of the National Academy of Sciences (NAS) Climate Journey Map (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA supports the efforts of its members and health care organizations in our state to decarbonize their operations and supply chains emphasizing the importance of collaboration and knowledge-sharing to drive sustainable practices (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA commit to promoting and disseminating the finalized NAS Climate Journey Map & Resource Repository within its network and encouraging its members and affiliated organizations to utilize these valuable tools and resources to advance their sustainability efforts and contribute to a low carbon and more resilient health care sector (Directive to Take Action).

**B-9 (A-23) – Suicide Fatality Review by Local Health Departments (SUBSTITUTE RESOLUTION B-9 [A-23] ADOPTED IN LIEU OF RESOLUTION B-9 [A-23])**

**Authors: Donald Ross, MD (KCMS) / Mark Levy, MD (KCMS)**

RESOLVED, that the WSMA support adequate resources, including funding and data accessibility from the Washington state legislature, to allow for the performance of fatality reviews (modeled after RCW 70.54.450) for all persons who died by suicide or overdose within 30 days of being discharged from a psychiatric hospital, or a hospital’s psychiatric emergency department, or a general acute care hospital to which the person had been admitted for psychiatric care due to the unavailability of an inpatient psychiatric placement. Based on these reviews, the Department of Health should make actionable recommendations to the Secretary of Health and the legislature around preventable causes of mortality (New HOD Policy).

**C-10 (A-23) – Non-Competition Clauses in Employment Contracts (ADOPTED)**

**Authors: Chris Wong MD (WCACP) / Carrie Horwitch, MD (WSMA BOT)**

RESOLVED, that the WSMA support a Washington state ban on non-compete clauses for physicians in the state of Washington (New HOD Policy).

**C-17 (A-23) – Expanding Psychiatric Care and Training (NOT ADOPTED)**

**Report E – Nominations, 2024-2025 WSMA Officers and Trustees (FILED)**

**Report F – Membership Report (FILED)**

**Report G – WSMA Policies Report (FILED)**

**EXECUTIVE COMMITTEE REPORTS**

**Report A – WSMA Strategic Planning (FILED)**

**Report C – Continuing Medical Education (FILED)**

**Report D – WSMA Early Career Sections (FILED)**

**Report E – WSMA Coordinated Quality Improvement Program (FILED)**

**Report F – WSMA Latinx Advisory Council (FILED)**

**Report G – WSMA DEI Committee (FILED)**

**INFORMATIONAL REPORTS**

**Report 1 – Physicians Insurance A Mutual Company (FILED)**

**Report 2 – University of Washington School of Medicine (FILED)**

**Report 3 – Pacific Northwest University of Health Sciences (FILED)**

**Report 4 – Comagine Health (FILED)**

**Report 5 – WSMA Foundation for Health Care Improvement (FILED)**

**Report 6 – Washington Physicians Health Program (FILED)**

**Report 7 – Washington Medical Commission (FILED)**

## RESOLUTIONS

### **B-1 – Public Health Advisory Board (ADOPTED)**

**Authors: William Hirota, MD (PCMS) / WSMA Executive Committee**

RESOLVED, that the WSMA supports coordination with the Public Health Advisory Board, including sharing advocacy and educational opportunities specific to public health that emphasize underserved or underrepresented patients (New HOD policy); and BE IT FURTHER

RESOLVED, that the WSMA recruit and mentor a delegate to the Public Health Advisory Board (Directive to Take Action).

### **B-2 – Directing WSMA To Advocate for A Reduced Volume of Prior Authorizations (ADOPTED AS AMENDED)**

**Authors: Lucinda Grande, MD (WSAM) / Elia Cole, DO (TMCMS)**

RESOLVED, that the WSMA will advocate for state legislation, regulation and/or policy changes to reduce the total volume of prior authorization demands on physicians and other prescribers (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA will support efforts to exempt frequently approved medical services and prescription drugs from the prior authorization process (New HOD Policy).

### **B-3 – Improving Sexual Health in Washington State (ADOPTED AS AMENDED)**

**Authors: Colin Fields, MD (WSMA BOT) / Kevin Johnson, MD (KCMS)**

RESOLVED, that the WSMA disseminate information to increase awareness of the recommendations for STI prevention, screening, and treatment options within Washington state and in an edition of its quarterly publications (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA disseminate information to members to increase awareness of the need to screen sexually active persons for syphilis and other sexually transmitted infections, regardless of gender identity or sexual orientation (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA disseminate information to members about the process needed for CLIA approval from labs to conduct self-collection swabs for STI screening and best practices for self-collection of swabs (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA endorse universal screening for syphilis in pregnant persons during 1st trimester, 3rd trimester, and at time of presentation for delivery (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA support legislation to modify state law requiring submission of test specimens for RPR confirmation at the state level, enabling commercial labs to conduct confirmatory testing and share results with public health (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA support public health jurisdictions having appropriate access to health system electronic health records to ease result integration, reduce burden on physician reporting, and expedite efficient treatment of patients and their partners (New HOD Policy).

**B-4 – Increasing Harm Reduction Education and Resources (ADOPTED)**

**Authors: June Bredin, MD (WAFP) / Lillian Wu, MD (WAFP)**

RESOLVED, that the WSMA advocate to include harm reduction education as a component of the competency-based curricula taught by all medical schools and residencies (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA provide increased educational opportunities about harm reduction as a component of medication-assisted treatment for substance use disorders (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA advocate for funding for harm reduction resources and training for physicians and other health care practitioners (New HOD Policy).

**B-5 – Inactive Counties Section to The House of Delegates (REFERRED)**

**Authors: Amy E. Ellingson, MD (WSMA BOT) / Carrie Horwitch, MD (WSMA BOT) / Andy Shang (WSMA BOT)**

RESOLVED, that the WSMA will amend its bylaws to allow for the creation of an “inactive counties” section to the WSMA House of Delegates, with WSMA members who neither reside nor practice in a county with a functioning, non-unified county medical society eligible to join the “inactive counties” section, and that one delegate and one alternate will represent the “inactive counties” section of the WSMA House of Delegates (Modify WSMA Bylaws).

**B-6 – Liability Protections and Mentorship Program for Physicians (REFERRED)**

**Authors: Farrokh Farrokhi, MD (KCMS) / Rachel Lundgren, MD (KCMS)**

RESOLVED, that the WSMA shall advocate for legislation providing liability protections for physicians who are shadowing each other and the physicians being shadowed when participating in quality improvement or mentorship programs (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA shall advocate for the establishment and promotion of a mentorship program for attending physicians, designed to facilitate peer learning and professional development through shadowing and other collaborative practices (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA and others shall provide resources and support to ensure the successful implementation and operation of this mentorship program, including but not limited to, educational materials, program guidelines, and administrative assistance (Directive to Take Action); and BE IT FURTHER

RESOLVED that the WSMA shall regularly communicate with and involve county medical societies in the development and refinement of this mentorship program to ensure it meets the needs of physicians across the state (Directive to Take Action).

**B-7 – Maintaining Medicaid Reimbursement for Audio-Only Telehealth Visits (ADOPTED AS AMENDED)**

**Authors: Daniel Low, MD (KCMS) / Leo Morales, MD (KCMS) / Komal Patil-Sisodia, MD (KCMS)**

RESOLVED, that the WSMA urges CMS to reconsider and reverse its decision to discontinue Medicaid reimbursement for audio-only telehealth visits, except for mental health services (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA calls upon federal and state policymakers to advocate for the continuation of audio-only telehealth reimbursement as a critical component of equitable healthcare access (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA encourages healthcare professionals, advocacy groups, and community organizations to join in efforts to highlight the importance of audio-only telehealth services and to advocate for policies that support the health needs of all populations, particularly the most vulnerable (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA supports ongoing research and data collection to assess the impact of telehealth modalities on health outcomes and to inform future telehealth policy decisions that prioritize health equity and access (New HOD Policy).

**B-8 – Health Risks of Micro and Nano Plastics (ADOPTED AS AMENDED)**

**Authors: Mark Vossler, MD (KCMS) / Daniel Low, MD (KCMS)**

RESOLVED, that the WSMA encourages hospitals and clinics to reduce their own use of plastics, particularly single-use plastics while maintaining patient safety and without increasing the administrative burden or workload for physicians (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA explicitly reach out to and collaborate with the Washington State Hospital Association to plan ways in which Washington hospitals can reduce their own use of plastics, particularly single-use plastics (Directive to Take Action); and BE IT FURTHER

RESOLVED, that WSMA endorses legislation to incentivize producers to use reusable, recyclable, or compostable packaging, to reduce waste, and to increase the ease of recycling plastics for Washington consumers (New HOD Policy).

**B-9 – Ensuring Effective Collaboration Between WSMA and County Medical Societies (REFERRED)**

**Authors: Kevin Johnson, MD / Daniel Low, MD (KCMS)**

RESOLVED, that the WSMA reaffirms and upholds the 2010 resolution stating that should WSMA decide to approach, or be approached by, a clinic, clinic network, or large physician group to discuss or negotiate membership, dues, or any issue affecting the recruitment or retention of a county medical society, the Association's Executive Committee or CEO shall give a minimum of 72 hours advance written notice to the executive directors and presidents of the affected county medical societies and work to include county membership as part of the package (2010 Policy); and BE IT FURTHER

RESOLVED, that the WSMA shall ensure recruitment efforts equally promote both WSMA and county society memberships, including proactive encouragement for group memberships to include county-level

membership and involving county leaders in discussions for new group memberships (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA shall provide free access to physician contact lists from their respective counties to all county medical societies (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA shall advertise county medical society events free of charge, provided they align with WSMA policy and do not impose a financial burden (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA shall provide discounts for developing CME programs to county medical societies (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA shall collaborate with county medical societies to ensure reciprocity in advertising and discounts, fostering a transparent and mutually beneficial collaboration (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA shall foster a collaborative and respectful relationship with county medical societies, supporting their sustainability and independence (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA shall actively work with its benefits organizations to extend the same discounts and advantages currently offered to WSMA members to county medical society members, thereby ensuring and enhancing the overall support for all physicians within the state (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA reaffirms its commitment to the principles and directives of the 2010 resolution, emphasizing enhanced collaboration and support between WSMA and county medical societies to ensure continuous improvement and mutual benefit. Furthermore, WSMA will work towards keeping county medical societies vibrant and engaged, with a focus on maintaining their regional independence and supporting their local advocacy and representation efforts (2010 Policy and New HOD Policy) (Directive to Take Action).

**B-10 – Training Primary Care Physicians in Prescribing Medications for Psychiatric Conditions**  
**(NOT ADOPTED)**

**B-11 – Adolescent Screening for Unhealthy Social Media Use in The Health Care Setting**  
**(ADOPTED)**

**Authors: Blake Marble (MSS) / Nicola Gerbino (MSS) / Clint Hauxwell, MD (WSMA BOT) / Eric Leung, MD, FAAP (WCAAP)**

RESOLVED, that the WSMA will work with the Department of Health to support the dissemination of pre-existing healthy social media guidelines and resources such as those established by the American Academy of Pediatrics, American Psychological Association, and the U.S. Surgeon General into the health care setting (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA supports the broader use of social media guidelines established by the American Academy of Pediatrics, American Psychological Association, and the U.S. Surgeon General and encourages physicians to use them as a part of patient care (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA acknowledges and supports the established ongoing research into the long-term effects of social media use (New HOD Policy).

**B-12 – Removing Prior Authorization From the Buprenorphine Monoprodukt Authorizations**  
**(ADOPTED AS AMENDED)**

**Authors: Lucinda Grande, MD (WSAM) / Penny Reck, MD (TMCMS)**

RESOLVED, that the WSMA will advocate for legislation, regulation, and/or policy change to remove prior authorization and other payor-based and facility-based obstacles from evidence-based medications for addiction treatment, including but not limited to buprenorphine monoprodukt and injectable medications for addiction treatment (New HOD Policy).

**B-13 – Diversity, Equity, And Inclusion Standing Committee** (ADOPTED)

**Authors: Katina Rue, DO (WSMA BOT) / Bindu Nayak, MD (WSMA BOT)**

RESOLVED, that the WSMA will amend its bylaws to establish a standing DEI Committee to support the WSMA in its goal of advancing health equity, diversity, inclusion, and belonging in medicine (Modify WSMA Bylaws).

**B-14 – Supporting Physician Use of AI In Practice Settings** (ADOPTED AS AMENDED)

**Authors: Colin Fields, MD (WSMA BOT) / John Scott, MD (WSMA BOT)**

RESOLVED, that the WSMA AI Workgroup partner with the AMA delegation to draft an AMA resolution advocating for the development of tools for AI products to better communicate levels of medical evidence (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA supports the use of augmented/artificial intelligence to improve patient health outcomes, reduce career fatigue, and streamline administrative processes (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA opposes enhancing or imposing additional liability on physicians or physician assistants who utilize augmented/artificial intelligence for clinical and administrative purposes (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA opposes the use of augmented/artificial intelligence to either increase administrative burden or impose mandates increasing physician workloads (New HOD Policy).

**B-15 – Expanding Payment for Visit Complexity For Office/Other Outpatient Services To Commercial Payers** (ADOPTED AS AMENDED)

**Authors: RJ Widrow, MD, PhD (TMCMS) / Margaret MacLeod, MD (TMCMS)**

RESOLVED, that the WSMA advocate for legislative, regulatory, and policy changes that will result in commercial payers recognizing and reimbursing the G2211 add-on code (New HOD Policy).

**B-16 – Advancing Access to Health Savings Accounts for All Americans** (ADOPTED AS AMENDED)

**Authors: Elia Cole, DO, MPH (TMCMS) / Penny Reck, MD (TMCMS)**

RESOLVED, that the WSMA supports access to Health Savings Accounts for all (New HOD Policy).

**B-17 – Reporting Of Health Care Access Metrics (REFERRED)**

**Authors: Anthony L-T Chen, MD, MPH (PCMS) / Breck Lebegue, MD, MPH (PCMS)**

RESOLVED, that the WSMA supports the collection and public reporting of health care access metrics such as Third Next Available Appointment (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA ~~will supports collaborate~~ collaboration with between academic, health care, public health, regulatory, physician, and patient partners to define metrics that are easy to collect, create toolkits to help practices, and health care systems to implement, and develop public reporting systems (Directive to Take Action); ~~and BE IT FURTHER~~

~~RESOLVED, that the WSMA will advocate for funding to implement and incentives for achieving good access metrics (Director to Take Action).~~

**B-18 – Enhancing Public Safety Through Standardized Placement and Expanded Access Of Automated External Defibrillators (AEDs) In Public Spaces (ADOPTED AS AMENDED)**

**Authors: Andy Tianfu Shang (WSMA BOT) / Johan Velo (MMS)**

RESOLVED, that the WSMA supports placement of Automated External Defibrillators (AEDs) in public spaces, including government buildings, schools, parks, and other athletic and recreational facilities in order to enhance public safety and increase out-of-hospital survival for civilians who experience a cardiac arrest (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA supports placement of Automated External Defibrillators (AEDs) within buildings across Washington to ensure consistent and rapid access during emergencies (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA supports collaboration with local schools, emergency response teams, and public health organizations to bring public awareness of this standardization process and optimize the accessibility and usage of AEDs in critical situations (New HOD Policy).

**B-19 – Ensuring Regular Updates to Originating County Societies on the Status of Submitted Resolutions (ADOPTED AS AMENDED)**

**Authors: Mark Levy, MD (KCMS) / Michelle Terry, MD (KCMS)**

RESOLVED, that the WSMA implement a policy requiring the HOD and the Board of Trustees to provide regular, scheduled updates to the originating component societies or authors regarding the status of their submitted resolutions, including any significant developments, actions taken, or obstacles encountered. These updates shall be provided at least quarterly, ensuring that the originating body remains actively engaged and informed, enabling them to contribute ongoing expertise and coordinate advocacy efforts effectively (New HOD policy); and BE IT FURTHER

RESOLVED, that the WSMA develop a formal process to track and report on the status of all resolutions, ensuring transparency and continuous communication with the originating bodies, thereby enhancing collaboration and the overall effectiveness of the Association’s advocacy efforts (Directive to Take Action).

**B-20 – Reinforce And Clarify Residency and Practice Requirements for WSMA Board of Trustees (REFERRED)**

**Authors: Daniel Low, MD (KCMS) / Michelle Terry, MD (KCMS)**

RESOLVED, that the WSMA strictly enforce the existing bylaws requirement that members of the Board of Trustees must have their principal residence in Washington state and/or be actively practicing medicine within the state throughout their term of service, ensuring that they are fully engaged with the local health care environment and the needs of Washington’s medical community (Reaffirm HOD Policy); and BE IT FURTHER

RESOLVED, that WSMA Board of Trustees members who are retired from practicing medicine must reside in Washington state as their principal residence, ensuring they remain closely connected to the community they serve (New HOD Policy); and BE IT FURTHER

RESOLVED, that WSMA Board of Trustees members who are not formally retired from practicing medicine must actively practice medicine, providing patient care for no less than one week per month, to ensure they remain closely connected to the health care needs of the community they serve (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA Board of Trustees shall implement a process to verify the principal residency and practice status of all current and future Board members, including regular compliance checks to ensure ongoing adherence to this requirement (Directive to Take Action); and BE IT FURTHER

RESOLVED, that any current Board member who does not meet these requirements shall be required to either relocate their principal residence to Washington state, meet the practice requirement within 6 months, or step down from their position, ensuring the Board is fully representative of and accountable to Washington state’s health care professionals (Directive to Take Action).

**REFERENCE COMMITTEE C**

**BOARD OF TRUSTEES REPORTS**

**Report D – AMA Delegation (FILED)**

**EXECUTIVE COMMITTEE REPORTS**

**Report B – Government Affairs and Policy (FILED)**

**INFORMATIONAL REPORTS**

**Report 9 – WAMPAC (FILED)**

**RESOLUTIONS**

**C-1 – Supporting Access to Contraception Without Prior Authorization (ADOPTED AS AMENDED)**

**Authors: Rod Trytko, MD (WSMA BOT) / Katina Rue, DO (WSMA BOT) / Kevin Johnson, MD (KCMS) / Vivienne Meljen, MD, FACOG (CCMS) / Erin Rose Medina, MD (SPCMS)**

RESOLVED, that the WSMA supports policy that hormonal contraception, long-acting reversible contraception, and immediate postpartum long-acting reversible contraception devices should be readily available without prior authorization (New HOD policy); and BE IT FURTHER

RESOLVED, that the WSMA supports the coverage of hormonal contraception, long-acting reversible contraception, and immediate postpartum long-acting reversible contraception devices and placement by Medicaid, Medicare, and private insurers, and that these be billed and paid separately from the obstetrical global fee (New HOD policy); and BE IT FURTHER

RESOLVED, that the WSMA supports public funding for the provision of hormonal contraception, long-acting reversible contraception, and immediate postpartum long-acting reversible contraception devices at the time of service for persons irrespective of health insurance status, not limited based on income (New HOD policy).

**C-2 – Creating A Digital Repository for Sterilization and Hysterectomy Consents (ADOPTED)**

**Authors: Rod Trytko, MD (WSMA BOT) / Katina Rue, DO (WSMA BOT) / Kevin Johnson, MD (KCMS) / Vivienne Meljen, MD, FACOG (CCMS) / Erin Rose Medina, MD (SPCMS)**

RESOLVED, that the WSMA support the creation of a digital repository for forms HHS-687 and WA13-365, to improve access to desired sterilization, reduce administrative burden, and improve the likelihood of payment to delivering health systems and surgeons as well as the integration of the aforementioned digital repository into electronic health record systems (New HOD policy).

**C-3 – Diaper Product Access and Retail Tax Exemption (ADOPTED)**

**Authors: Nicola Gerbino (MSS) / Eric Leung, MD (WCAAP) / Michael Van Dyke, DO (WCAAP)**

RESOLVED, that the WSMA supports legislative measures to increase access to children’s diaper products, including but not limited to 1. State retail tax exemptions for children’s diaper products and 2. Continued state funding of the Temporary Assistance for Needy Families (TANF) program (New HOD Policy).

**C-4 – Expanding Medicaid Coverage to Include Air Purifiers or Air Cleaners in Washington State for Individuals with Asthma (ADPOTED AS AMENDED)**

**Authors: Bindu Nayak, MD (WSMA BOT) / Katina Rue, DO (WSMA BOT) / Rachel Lundgren, MD (CDCMS) / Yakima County Medical Society Delegation**

RESOLVED, that the WSMA supports Medicaid coverage for in-home visits for patients with asthma and any durable medical equipment interventions deemed appropriate by the patient’s physician or physician assistant for indoor air pollution and other asthma triggers, such as air purifiers or air cleaners, to decrease indoor pollutants or asthma triggers (New HOD Policy).

**C-5 – Supporting Rail and Other Non-Single Occupancy Vehicle Transportation (ADOPTED AS AMENDED)**

**Authors: Breck Lebegue, MD, MPH (PCMS) / Mark Vossler, MD (KCMS)**

RESOLVED, that the WSMA supports rail and other non-single-occupancy-vehicle transportation that reduces pollution and greenhouse gas emissions, mitigates climate changes, improves mobility, and promotes healthier, sustainable communities (New HOD policy).

**C-6 – Making Education on Firearm Injury Prevention a Standard Part of The Health Curriculum for Washington State High School Students (ADOPTED)**

**Authors: Gregory Engel, MD, MPH, FAFP (KCMS) / Daniel Low, MD (KCMS)**

RESOLVED, that the WSMA recommends that the state of Washington make public health-based education on firearm injury prevention as a standard part of the mandated health curriculum for Washington state high school students (New HOD Policy).

**C-7 – Hospital Pricing and Ensuring Equitable Distribution of Health Care Funds (NOT ADOPTED)**

**C-8 – Establishing The Washington State Commission on Boys and Men (REFERRED)**

**Authors: Jeffrey Frankel, MD (KCMS) / Daniel Low, MD (KCMS)**

RESOLVED, that the WSMA advocate for the establishment of a Washington State Commission on Boys and Men to research and address health disparities affecting boys and men (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate that a State Commission on Boys and Men promote mental health awareness, and support systems specifically tailored to boys and men (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate to establish a Commission on Boys and Men that evaluates disparities and dropout rates among boys, promotes positive role models and mentorship programs, addressing bullying and fostering inclusive environments in schools, and use data to understand and mitigate the academic performance gaps between boys and girls (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate for the establishment of a Washington State Commission on Boys and Men to address domestic violence and abuse against boys and men, promote programs to reduce male involvement in violence and crime, and provide resources for boys and men who are victims of violence (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate for the establishment of a Washington State Commission on Boys and Men to recommend policies that support the health and well-being of boys and men, advocate for research and funding regarding these issues, and collaborate with healthcare professionals, educational institutions, community organizations, and policymakers (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate for the establishment of a Washington State Commission on Boys and Men to encourage more male education, training, and employment in social services, and understand the reasons for gender discrepancies in these fields (New HOD Policy).

#### **C-9 – Continuous Glucose Monitoring for People with Diabetes (ADOPTED AS AMENDED)**

**Authors: Leo Morales, MD (KCMS) / Mona Kathuria, MD (KCMS) / Zannah Herridge-Meyer, MD (KCMS)**

RESOLVED, that the WSMA advocate for Medicaid to establish uniform coverage for all Medicaid beneficiaries with diabetes per current Medicare guidelines (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA supports legislative efforts to ensure consistent and comprehensive coverage of Continuous Glucose Monitors for all diabetes patients across different insurance plans, including Medicaid (New HOD Policy).

#### **C-10 – Regarding Reducing Climate Impacts of Anesthesia (ADOPTED AS AMENDED)**

**Authors: Mark Vossler, MD (KCMS) / Daniel Low, MD (KCMS)**

RESOLVED, that the WSMA encourages all hospitals and surgical centers in Washington to adopt programs to reduce the climate impacts of anesthesia while maintaining clinical excellence (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA endorses legislation to assist hospitals, surgical centers, and anesthesiology practices in their efforts to reduce greenhouse gas emissions (New HOD Policy); and BE IT FURTHER

RESOLVED, that legislation addressing the climate impacts of anesthesia should not supersede the clinical judgment of the physician acting in the patient's best interest, nor ban any currently available anesthetic options (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA calls on our governor and our legislators to include funding for projects that address the climate impacts of anesthesia in the state budget (Directive to Take Action).

**C-11 – Maintaining Training Requirements for Coroners and Medical Examiners in Counties Under 40,000 Population (ADOPTED)**

**Authors: Chris Belcher, MD (KCMS) / Daniel Low, MD (KCMS)**

RESOLVED, that the WSMA advocate against any legislative efforts that seek to eliminate or reduce basic training requirements for coroners and medical examiners (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA support increased funding and resources to ensure that all coroners and medical examiners in Washington state, regardless of county population size, have access to the necessary training and continuing education to perform their duties effectively (New HOD Policy).

**C-12 – Support For Legislation That Improves Health Via Implementation of a Tax on Extreme Wealth (REFERRED)**

**Authors: Mark Vossler, MD (KCMS) / Daniel Low, MD (KCMS) / Charles Mayer, MD (KCMS)**

RESOLVED, that the WSMA supports legislation for a state wealth tax on intangible property which exempts the first \$250 million (New HOD Policy; Directive to Take Action); and BE IT FURTHER

RESOLVED, that these resources go directly to create a more robust Washington state safety net including increased resources for affordable housing, decreased higher education costs, food and nutrition support and poverty and economic inequity prevention programs (New HOD Policy; Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA create an educational event on the health and well-being benefits of wealth tax by October 1, 2024, available to all WSMA members (Directive to Take Action).

**C-13 – Washington State Return-To-Service Loan Repayment (ADOPTED AS AMENDED)**

**Authors: Clinton Hauxwell, MD (WSMA BOT) / Evan Thomas (MSS) / Nicola Gerbino (MSS)**

RESOLVED, that the WSMA will host an internal workgroup to discuss the development of a return-to-service program in Washington state (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA will support legislation establishing return-to-service programs for medical students in Washington state (New HOD Policy).

**C-14 – Washington State Senior Medical Corp (NOT ADOPTED)**

**C-15 – Washington State Single Source Credentialing (ADOPTED)**

**Authors: Margaret MacLeod, MD (TMCMS) / RJ Widrow, MD, PhD (TMCMS)**

RESOLVED, that the WSMA advocate for the necessary legislation and assist in developing a point of single source credentialing to be used by all insurance companies, medical practices, and hospitals in the state of Washington (New HOD Policy).

### **C-16 – Support For the Health Engagement Hub Model of Addiction Treatment (ADOPTED)**

**Authors: Dave Cundiff, MD (Pacific) / Lucinda Grande, MD (WSAM)**

RESOLVED, that the WSMA endorses statewide and national implementation of Health Engagement Hubs where people who use drugs can receive medications to treat substance use disorders and relevant support services at low-barrier, community-based access points using a team-based model of care, a model with demonstrated ability to reduce overdose deaths and improve quality of life (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA will ask the American Medical Association to endorse and advocate for the expansion of Health Engagement Hubs, where people who use drugs can receive medications to treat substance use disorders and relevant support services at low-barrier, community-based access points using a team-based model of care, a model with demonstrated ability to reduce overdose deaths and improve quality of life (Directive to Take Action).

### **C-17 – Reforming The Prior Authorization Processes (ADOPTED AS AMENDED)**

**Authors: Amish Dave, MD (WSMA BOT) / Rick Kaner, MD (KCMS) / Kevin Johnson, MD (KCMS)**

RESOLVED, that the WSMA work with the legislative process to create exemptions from the prior authorization process for contracted health professionals if the plan or insurer approved or would have approved not less than 90% of the prior authorization requests in the most recent completed one-year contracted period. Furthermore, the prior authorization process would be discontinued for services, items, or supplies that are approved 95% of the time (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA propose regulations to ensure AI denial determinations are always reviewed by a human physician to maintain accountability and patient safety (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA establish clear criteria for peer-to-peer reviews, ensuring that only appropriately qualified and specialized physicians are allowed to act as peer reviewers (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate that the Office of the Insurance Commissioner implement a grievance and appeals process that ensures grievances involving delays, denials, or modifications of health care services are reviewed by a physician of the same or similar specialty as the physician requesting authorization for those services (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate for legislation to prevent health care service plans from retroactively denying or modifying a covered health care service based on the rescission of a prior authorization exemption, except in cases of fraud or substantial non-performance (New HOD Policy).

### **C-18 – Addressing Health Disparities in Maternal and Infant Mortality (NOT ADOPTED)**

### **C-19 – Legal Immunity to Physicians for Good Faith Reporting of Impaired Drivers (REFERRED)**

**Authors: Anukrati Shukla, MD (KCMS) / Amish Dave, MD (WSMA BOT) / Peter Barkett, MD (WSMA BOT)**

RESOLVED, that the WSMA supports legal immunity for physicians, acting in good faith, who report impaired drivers to the Department of Licensing (New HOD Policy).

**C-20 – Enhancing And Expanding Financial Support for Medical Education in Washington State (REFERRED)**

**Authors: Daniel Low, MD (KCMS) / Michelle Terry, MD (KCMS)**

RESOLVED, that the WSMA advocate for the Washington State Legislature to consider implementing a public-private partnership to increase financial support for medical education, encouraging collaboration with local businesses, corporations, philanthropic organizations, and individual donors (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA encourages the Washington State Legislature to explore additional incentives for large donations, including but not limited to:

- Matching Grant Programs: The state could match private donations, amplifying the impact and increasing the funds available for medical education.
- Tax Incentives: Explore tax credits or other state-level tax benefits for donors who contribute to medical education.
- Legislative Support: Advocating for policies that promote long-term funding initiatives, including state-supported matching funds and tax-exempt status for large contributions (New HOD Policy).

**C-21 – Enhancing Awareness and Access to The Washington State Child Tax Credit (ADOPTED)**

**Authors: Daniel Low, MD (KCMS) / Michelle Terry, MD (KCMS)**

RESOLVED, that the WSMA advocate for increased state-level funding and administrative resources dedicated to enhancing the outreach and implementation of the Washington State Child Tax Credit to ensure all eligible families are aware of and able to claim the credit (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate for simplifying the Washington State Child Tax Credit application process, including making the application more accessible online and providing support for non-English speaking applicants (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate for targeted outreach efforts in underrepresented communities, including rural areas and historically marginalized groups, to increase participation in the Washington State Child Tax Credit program (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate for the inclusion of Washington State Child Tax Credit application information and assistance in Federally Qualified Health Centers and other health care settings where a large proportion of Medicaid-eligible patients receive care (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA encourage the Washington State Legislature to implement Washington State Child Tax Credit sign-up opportunities during school registration for free and reduced-price lunches, ensuring that families most in need are informed and able to access the credit (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA advocate for providing clear, accessible information on the required documentation for Washington State Child Tax Credit applications, including federal tax returns, Social Security Numbers or ITINs, Washington State ID numbers, and bank account details, to streamline the application process and increase successful claims (New HOD Policy).

**C-22 – Advocacy For Extending Medicaid Coverage and Increasing Funding for Postpartum Substance Use Disorder (SUD) Treatment (ADOPTED AS AMENDED)**

**Authors: Donald Ross, MD (KCMS) / Michelle Terry, MD (KCMS) / Lucinda Grande, MD (WSAM) / Vania Rudolf, MD (WSAM)**

RESOLVED, that the WSMA support-Medicaid coverage of comprehensive postpartum services, coordinated with infant care to support the parent-infant dyad whenever clinically appropriate, for persons with\_SUD. Coverage of these services, when medically necessary, should continue for at least twelve months after delivery, unless evidence supports a different time period for optimal results (New HOD Policy).

**C-23 – Support For Improving Maternal Health Outcomes and Extended Postdelivery Hospital Care for Birthing People with Substance Use Disorder (ADOPTED)**

**Authors: Lucinda Grande, MD (WSAM) / Vania Rudolf, MD (WSAM) / Donald Ross, MD (KCMS)**

RESOLVED, that the WSMA endorse statewide and national implementation of the COMPASSION 5-day stay where birthing people with substance use disorder at the time of delivery can engage in the extended postpartum floor hospital care to receive integrated, patient-centered comprehensive service tailored to support whole person health for the birthing parent, newborn and the family unit; a model with demonstrated ability to reduce maternal overdose deaths and improve quality of life and parenting (New HOD Policy); and BE IT FURTHER

RESOLVED, that the WSMA will ask the American Medical Association to endorse and advocate for the expansion of COMPASSION 5-day postpartum floor model, where birthing people who use drugs can receive medications to treat opioid use disorder (MOUD), can receive overdose education, prevention and harm reduction and receive a warm hand-off to longitudinal community-based access to ongoing comprehensive postpartum care, a model with demonstrated ability to reduce overdose deaths and improve quality of life (New HOD Policy).

**C-24 – Pregnancy As a Qualifying Event (ADOPTED)**

**Authors: June Bredin, MD (WAFP) / Lillian Wu, MD (WAFP)**

RESOLVED, that the WSMA endorse the establishment of pregnancy as a triggering life event for a Special Enrollment Period in the Affordable Care Act Marketplace (New HOD Policy) and BE IT FURTHER

RESOLVED, that the WSMA bring a resolution to the American Medical Association, endorsing the establishment of pregnancy as a triggering life event for a Special Enrollment Period in the Affordable Care Act Marketplace, and publicly advocate that the US Department of Health and Human Services and Congress establish pregnancy as a qualifying life event for a Special Enrollment Period in the Affordable Care Act Marketplace (Directive to Take Action).

**C-25 – Oppose Washington State Initiative 2109 (ADOPTED)**

**Authors: Eric Leung, MD (WCAAP) / Breck Lebegue, MD (PCMS) / Anthony Chen, MD (PCMS)**

RESOLVED, that the WSMA publicly oppose Initiative 2109 and provide education to its members and the public to Vote “no” (Directive to Take Action).

## 2024-2025 OFFICERS AND TRUSTEES

The following members were elected (unless otherwise noted):

President	John Bramhall, MD, PhD	King
Past President	Nariman Heshmati, MD, MBA, FACOG	Snohomish
President-Elect	Bridget Bush, MD, FASA	Skagit-Island
Vice President	Matt Hollon, MD, MPH, MACP	Spokane
Secretary-Treasurer	Bindu Nayak, MD	Chelan-Douglas
AMA Delegate	Matthew Grierson, MD	King
AMA Delegate	Erin Harnish, MD	Cowlitz-Wahkiakum
AMA Delegate	Nariman Heshmati, MD, MBA, FACOG	Snohomish
AMA Delegate	Elizabeth Peterson, MD*	Pierce
AMA Delegate	Sheila Rege, MD	Benton-Franklin
AMA Delegate	Rodney Trytko, MD, MBA, MPH*	Spokane
AMA Alternate	Amish Dave, MD, MPH*	King
AMA Alternate	Colin Fields, MD	King
AMA Alternate	Teresa Girolami, MD*	King
AMA Alternate	Rajneet Lamba, MD	King
AMA Alternate	Vivienne Meljen, MD	Clark
AMA Alternate	Libby Parker, MD	King
Finance Cmte Member	David McClellan, MD <sup>1</sup>	Spokane
Speaker of House	Matthew Grierson, MD	King
Vice Speaker	Ray Hsiao, MD	King
Trustee	Peter Barkett, MD	Kitsap
Trustee	Avanti Bergquist, MD	King
Trustee	Linda Brown, MD*	Skagit-Island
Trustee	Naomi Busch, MD	King
Trustee	Rachel Clement, MD, FASA	Chelan-Douglas
Trustee	Amy Ellingson, MD*	Okanogan
Trustee	Ingrid Gerbino, MD	Snohomish
Trustee	Alexander Hamling, MD, MBA, FAAP*	King
Trustee	Stephanie Hansen, DO	Yakima
Trustee	Trace Julsen, MD	Spokane
Trustee	Rebecca Hoffman, MD*	Clark
Trustee	Carrie Horwitch, MD*	King
Trustee	Lisa Ivanjack, MD*	Clark
Trustee	Vivienne Meljen, MD	Clark
Trustee	Alan Melnick, MD, MPH	Clark
Trustee	Okechukwu Ojogho, MD*	Spokane
Trustee	James Park, MD, MHA	King
Trustee	Christine Pizzute, MD	King
Trustee	Camille Puronen, MD, MPH	King
Trustee	John Scott, MD, M.Sc*	King
Trustee	Áine Yore, MD	Snohomish
Trustee (Young Physician)	Anukrati Shukla, MD	King
Trustee (Resident)	Jacob Leary, MD	King
Trustee (Student)	Andy Shang	Yakima

\*Holdover; position open for election in 2025.

<sup>1</sup>Re-elected to the Finance Committee, but not a member of the Board of Trustees. The Finance Committee elects its own chair who serves on the Board of Trustees. The Chair of the Finance Committee is Don Benz, MD.