

Actions of the 2022 House of Delegates

Bylaw Amendment 01-22

HOD Action: **Adopted as Amended**

Title: "Resident and Fellow Members Voting in TMA Elections"

Bylaw Amendment No. 02-22

HOD Action: **Adopted as Amended**

Title: "Nominations for Speaker and Vice Speaker of the House of Delegates"

Bylaw Amendment No. 03-22

HOD Action: **Adopted as Amended**

Title: "Confirmation of Judicial Counselors as Officers of TMA"

Bylaw Amendment No. 04-22

HOD Action: **Adopted**

Title: "Component Medical Societies' Process to Judge the Qualifications of Applicants for Membership"

Bylaw Amendment No. 05-22

HOD Action: **Adopted as Amended**

Title: "Regional Second Seat on the TMA Board of Trustees"

Bylaw Amendment No. 06-22

HOD Action: **Adopted**

Title: "Definition of Young Physicians"

Resolution No. 01-22

HOD Action: **Adopted by Unanimous Consent**

Title: "The Approaching Physician Shortage Crisis" [Reaffirmation of First Resolve of Resolution No. 05-08 and 01-15]

Resolution No. 02-22

HOD Action: **Adopted**

Title: "Hospital Medical Staff Self-Governance"

Author: Marijka Grey, MD, Chattanooga-Hamilton County Medical Society

Resolution No. 03-22

HOD Action: **Adopted**

Title: "Negative Public Health Impact of Electronic Scooters"

Author: Michael Feldman, MD, Nashville Academy of Medicine

Resolution No. 04-22

HOD Action: **Adopted as Amended**

Title: "Resolution on Rural Outreach in Tennessee"

Author: Edward Capparelli, MD, Ex-Officio Delegate

Resolution No. 05-22

HOD Action: **Adopted as Amended**

Title: "TMA Resolution on Physician Wellness"

Author: Edward Capparelli, MD, Ex-Officio Delegate

Resolution No. 06-22

HOD Action: **Withdrawn by Author**

Resolution No. 07-22

HOD Action: **Not Adopted**

Title: "Dissolution of Daylight-Saving Time and Adoption of Standard Time"

Author: Kayla Buttafuoco, Medical Student Section

Resolution No. 08-22

HOD Action: **Adopted**

Title: "Required Provision and Tracking of Fentanyl Testing Strips by Syringe Services Programs (SSPs)"

Author: Kaleel Wainwright, Nashville Academy of Medicine

Resolution No. 09-22

HOD Action: **Adopted**

Title: "Prior Authorization Reform"

Author: James Cates, Jr., MD, Chaor, TMA Board of Trustees

Resolution No. 10-22

HOD Action: **Adopted**

Title: "Indoor Tanning Regulation"

Author: Michael Schneider, MD, Tennessee Dermatology Society

Resolution No. 11-22

HOD Action: **Referred to the Board for Action**

Title: "Support an Extended Prescription Renewal Period in Tennessee"

Author: Reeves Johnson, MD, Knoxville Academy of Medicine

Resolution No. 12-22

HOD Action: **Not Adopted**

Title: "All Aboard"

Author: Charles Leonard, MD, Lakeway Medical Society

Resolution No. 13-22

HOD Action: **Referred to the Board for Report & Action**

Title: "Collaborative Pharmacy Practice"

Author: Michelle Allmon, MD, Tennessee Chapter, American College of Physicians

Resolution No. 14-22

HOD Action: **Adopted**

Title: "Request for Legal Immunity for Prescribing by Physicians"

Author: Bob Vegors, MD, Tennessee Chapter, American College of Physicians

Resolution No. 15-22

HOD Action: **Referred to the Board for Report**

Title: "Modification of 2021 Tennessee Permitless Handgun Carry Law"

Author: Bob Vegors, MD, Tennessee Chapter, American College of Physicians

Resolution No. 16-22

HOD Action: **Referred to the Board for Action**

Title: "Appropriate Credentialing and Supervising of Medi-Spas"

Author: Tom Gallaher, MD, Knoxville Academy of Medicine

Resolution No. 17-22

HOD Action: **Adopted**

Title: "Ensuring Vitiligo Patients Access to Medications"

Author: Michael Schneider, MD, Tennessee Dermatology Society

ADOPTED AS AMENDED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Bylaw Amendment No. 01-22

INTRODUCED BY: ROBIN WILLIAMS, MD, CHAIR
COMMITTEE ON CONSTITUTION AND BYLAWS

SUBJECT: RESIDENT AND FELLOW MEMBERS VOTING IN TMA ELECTIONS

RESOLVED, That TMA Bylaw Chapter I, Section A.11 be repealed and replaced with new language so as to read as follows:

~~Sec. 11. From this point forward, the membership at at large shall be defined as active, associate, veteran, special, intern and resident, and elected student representatives to the Tennessee Medical Association, House of Delegates from each of the four medical schools and the Medical Student Section.~~

Sec. 11. From this point forward, the membership-at-large shall be defined as:

- a) active members;
- b) associate members;
- c) veteran members;
- d) special members
- e) intern, resident, and fellow members; and
- f) one student representative to the TMA House of Delegates from each accredited osteopathic and allopathic medical school in Tennessee with an established medical student section chapter; and
- g) one Medical Student Section representative to the TMA House of Delegates. And be it further

RESOLVED, That TMA Bylaw Chapter IV, Section B.6 be amended by insertion and deletion so as to read as follows:

~~Sec. 6. Only members of the TMA in good standing~~ The membership-at-large at the time elections are held are is eligible to participate on the Nominating Committee, or cast a vote in elections for president-elect, councilor, or trustee.

ADOPTED AS AMENDED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Bylaw Amendment No. 02-22

INTRODUCED BY: ROBIN WILLIAMS, MD, CHAIR
COMMITTEE ON CONSTITUTION AND BYLAWS

SUBJECT: NOMINATIONS FOR SPEAKER AND VICE SPEAKER OF THE HOUSE OF DELEGATES

RESOLVED, That TMA Bylaw Chapter IV, Section B.1 be amended by insertion and deletion so as to read as follows:

Sec. 1. Elections for speaker of the House of Delegates and vice-speaker shall be by vote of the House of Delegates and the majority of the votes cast shall be necessary to elect. The House of Delegates shall elect the speaker and vice speaker of the House of Delegates from a slate of nominee(s) certified by the Nominating Committee at least thirty calendar days prior to the date of the opening session of the House of Delegates and any nomination properly made prior to the conclusion of the first session of the House of Delegates and reviewed thereafter certified by the Nominating Committee prior to the taking of a vote; And be it further

RESOLVED, That TMA Bylaw Chapter IV, Section 2.e be amended by insertion and deletion so as to read as follows:

e) By December 1 of each year, submit nominees to the chief executive officer for open positions for: speaker and vice-speaker of the TMA House of Delegates, president-elect, councilors, and board of trustees. The Nominating Committee may reconvene to certify nominations for speaker and vice speaker up to thirty calendar days prior to the date of the opening session of the House of Delegates. Eligibility for election as speaker or vice-speaker must be verified prior to the vote for any candidate nominated from the floor.

ADOPTED AS AMENDED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Bylaw Amendment No. 03-22

INTRODUCED BY: ROBIN WILLIAMS, MD, CHAIR
COMMITTEE ON CONSTITUTION AND BYLAWS

SUBJECT: CONFIRMATION OF JUDICIAL COUNSELORS AS OFFICERS OF TMA

RESOLVED, That TMA Bylaw Chapter IV, Section A.1 be amended by insertion so as to read as follows:

The officers of the Association shall be a president, president-elect, immediate past president, the elected trustees, the judicial counselors (“counselors”), and a speaker and vice speaker of the House of Delegates.

ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Bylaw Amendment No. 04-22

INTRODUCED BY: ROBIN WILLIAMS, MD, CHAIR
COMMITTEE ON CONSTITUTION AND BYLAWS

SUBJECT: COMPONENT MEDICAL SOCIETIES' PROCESS TO JUDGE THE
QUALIFICATION OF APPLICANTS FOR MEMBERSHIP

RESOLVED, That the Tennessee Medical Association Judicial Council be directed to submit changes to the *Tennessee Medical Association Peer Review Procedures Booklet* Fifth Edition to the TMA Bylaws Committee for review and approval creating a due process consistent with TMA's Bylaws giving component medical societies the option to judge the qualifications of membership applicants. And be it further

RESOLVED, That Bylaw Chapter I, Section B.4 be amended by insertion and deletion so as to read:

Sec. 4. Every reputable physician who is legally licensed and registered in Tennessee under Title 63, Chapters 6 or 9 of the Tennessee Code Annotated, or any other state of the United States, who is practicing or who will agree to practice medicine or osteopathy, shall be eligible for membership. Interns and residents serving in an approved intern or resident status in approved hospitals in Tennessee and in accordance with Tennessee law, but who are not legally licensed and registered in Tennessee shall also be eligible for membership. Medical students who are in good standing in approved medical or osteopathic schools in Tennessee shall also be eligible for membership. Veteran members who are otherwise qualified but whose licenses have been revoked solely for failure to register shall continue to be eligible for membership.

~~Each component society shall judge the individual qualification of its members.~~ may, at the component society's discretion, judge the individual qualification of its applicants for membership. Each component medical society shall declare in writing if it will judge

the individual qualification of its applicants for membership, and if so, additionally declare that it will abide by the due process requirements for such review in the latest edition of the peer review procedures booklet. Component medical societies opting to make such declarations shall have the final decision over their applications until such declaration is revoked in writing by the leadership of that component medical society. Decisions regarding applications for direct membership or for membership in component medical societies which do not make such declarations shall be in TMA's sole discretion.

Component societies may establish an affiliate membership category

for other health professionals if this category is deemed appropriate for local purposes, but only physicians as defined in Chapter 1(A), Section 9 of the Bylaws are eligible for membership in the Tennessee Medical Association.

In addition, the Chattanooga-Hamilton County Medical Society may establish a physician affiliate category for physicians who exclusively practice medicine in Georgia and are members of the Medical Association of Georgia if this category is deemed appropriate for Chattanooga-Hamilton County Medical Society purposes.

Only licensed and registered physicians who are active, veteran, or intern or resident members, and students who are members in good standing of the Tennessee Medical Association may be elected to office in a component society or to represent it in the House of Delegates of the Tennessee Medical Association. Physician and student members of component societies must also be members of the Tennessee Medical Association, unless they have joined the Association from counties in which there is no component society available. Each component society of this Association may amend its constitution and/or bylaws to provide that the payment of dues to the American Medical Association shall be a condition of active membership in the society. Before a charter is issued to any component society, full and ample notice and opportunity shall be given to every such physician in the county to become a member. And be it further,

RESOLVED, That a new Bylaw Chapter VI, Section 6 be adopted to read as follows:

The Judicial Council shall ensure that the peer review procedures booklet includes an adequate due process procedure for applicants who wish to appeal the denial of their membership application by a component medical society which elects to judge the individual qualification of its applicants for membership.

ADOPTED AS AMENDED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Bylaw Amendment No. 05-22

INTRODUCED BY: O. LEE BERKENSTOCK, MD, EX-OFFICIO DELEGATE
RONALD H. KIRKLAND, MD, EX-OFFICIO DELEGATE

SUBJECT: REGIONAL SECOND SEAT ON THE TMA BOARD OF TRUSTEES

RESOLVED That TMA Bylaw Chapter V, Section 3 be amended by insertion and deletion so as to read as follows:

Members of the Board of Trustees shall be selected on a regional basis, one position elected from each of the eight regions with an additional position for each region with more than 1,000 dues paying members. ~~as determined by TMA in such region by October 1 of the year preceding the election. Additional position trustees shall serve their complete terms even if the region's membership falls below 1000 members during non election years.~~ Members from counties without constituted medical societies and members who pay discounted dues are counted in their regional total.

When any region reaches 1,000 dues paying members, that region shall nominate and/or elect a second board member to be seated at the next meeting of the TMA Board of Trustees. Nominations will be made by the component societies in that region. If more than one component society is active in a region. If the regional nominating committee nominates one nominee, then that member will be seated at the next meeting of the TMA Board of Trustees. If the regional nominating committee nominates more than one nominee, then those members will be voted on by TMA members in that region via a special election conducted by TMA.

New trustees filling a second regional seat will serve a minimum of 18 months, and a maximum of two-years, to end their time of service with the regular transition of TMA board members at the annual meeting. A second regional trustee will serve the full 18-24 months, even if the region's membership falls below 1,000 members during that time. If a region has a second board seat, and has 1,000 members as of October 1 preceding the end of that trustee's board term, then that second regional seat will

be eligible for re-election during the standard TMA elections in the spring,
regardless of if that region's first board seat is usually elected in that year.

ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Bylaw Amendment No. 06-22

INTRODUCED BY: AMY GORDON BONO, MD, DELEGATE, NASHVILLE ACADEMY OF
MEDICINE
RONALD H. KIRKLAND, MD, EX-OFFICIO DELEGATE

SUBJECT: DEFINITION OF YOUNG PHYSICIAN

RESOLVED That TMA Bylaw Chapter III, Section 14 be amended by insertion and deletion so as to read as follows:

There shall be a Young Physician Section to provide for the representation of the interests of young physicians within the Association. Young physicians are defined as ~~practicing physicians under age 40; or in their first eight years of practice~~ physicians age 40 and under, who are not actively training as residents or fellows in an approved training program. Applications for exemptions for physicians over age 40 who have less than eight years of professional practice after residency and fellowship training may be considered by the Judicial Council. Each component society shall be entitled to representation in the section. All representatives shall be members of the Association. The Young Physician Section shall be organized under a governing body and shall elect one delegate from each region to represent it in the House of Delegates of the Association. The Young Physician Section may elect its own governing body.

ADOPTED BY UNANIMOUS CONSENT MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 01-22

INTRODUCED BY: TMA BOARD OF TRUSTEES
JAMES W. CATES, JR., MD, CHAIR

SUBJECT: THE APPROACHING PHYSICIAN SHORTAGE CRISIS
(REAFFIRMATION OF FIRST RESOLVE OF RESOLUTION NO. 05-08 AND 01-15)

REFERRED TO: CONSENT CALENDAR

RESOLVED, That the Tennessee Medical Association will work toward expanding residency positions and medical schools.

Sunset: 2029

ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 02-22

INTRODUCED BY: MARIJKA GREY, MD
CHATTANOOGA – HAMILTON COUNTY MEDICAL SOCIETY

SUBJECT: HOSPITAL MEDICAL SELF-GOVERNANCE

RESOLVED, That the Tennessee Medical Association adopt the following policies regarding the self-governance of hospital medical staffs in our state:

- (1) Medical staffs should maintain their autonomy from hospital administrations and through its committee structure;
- (2) Medical staffs should use independent attorneys when needing legal advice or representation; and be it further

RESOLVED, That the Tennessee Medical Association adopts the following medical staff member bill of rights in order to be able to carry out professional obligations:

- (1) the right to care for patients without compromise;
- (2) the right to freely advocate for patient safety;
- (3) the right to be fairly compensated for providing care;
- (4) the right to be evaluated by unbiased peers who are actively practicing physicians in the community and same specialty;
- (5) the right to care for our own well-being;
- (6) the right to full due process when privileges are questioned or challenged;
- (7) the right to reasonable privacy;
- (8) the right of medical staffs to be self-governed and independently advised;
- (9) the right of freedom from personal loss or liability for adverse outcomes relating to medical practice based on compassion and good judgment within community standards; and
- (10) the right to fair market and transparent economic competition in our communities between hospitals with or without employee physicians and other allied healthcare professionals and independent physicians and groups in the delivery of healthcare

services and compensation based on appropriate community need;
and be it further

RESOLVED,

The Tennessee Medical Association adopts as policy that the following concepts should be included in medical staff bylaws:

- (1) The medical staff shall have, at the very least, one open medical staff meeting per year where issues will be debated and voted upon in an open forum without collusion or influence by hospital administrators;
- (2) The adoption of the medical staff bylaws and amendments thereto (including retroactive changes) to the rules and regulations be voted upon at such meeting(s) with a secret ballot under the direct supervision of the medical staff without interference;
- (3) The election of medical staff officers be conducted by closed ballot under the direct supervision of the medical staff without interference;
- (4) Any financial or other relationship with the hospital which may present a conflict of interest or appearance of a conflict of interest shall be disclosed by nominated and existing medical staff leaders in any official position to the medical staff in a confidential letter to members of the medical staff. These conflicts shall be disclosed at the beginning of each medical executive committee or other medical staff committee meeting. Any member with a conflict must recuse themselves from consideration of the matter and vacate the room during discussions of the matter with which they have a conflict; and
- (5) The governing board of every hospital in the state have at least one physician member elected by the medical staff.

Sunset: 2029

ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 03-22

INTRODUCED BY: MICHAEL FELDMAN, MD
NASHVILLE ACADEMY OF MEDICINE

SUBJECT: NEGATIVE PUBLIC HEALTH IMPACT OF ELECTRONIC SCOOTERS

RESOLVED, That the Tennessee Medical Association advocate for the further limiting availability of shared dockless electronic scooters in the state of Tennessee; and be it further

RESOLVED, That the Tennessee Medical Association advocate that use of said scooters be contingent on presence and enforcement of mandatory helmet laws, ready availability of helmets, and improved shared accountability by dockless scooter companies for helmet availability and injury prevention

Sunset: 2029

ADOPTED AS AMENDED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 04-22

INTRODUCED BY: EDWARD CAPPARELLI, MD
EX-OFFICIO DELEGATE

SUBJECT: RESOLUTION ON RURAL OUTREACH IN TENNESSEE

RESOLVED, That the Tennessee Medical Association Board of Trustees in conjunction with Tennessee Medical Association Legislative Committee shall educate members of the Tennessee General Assembly on current programs that expand access to healthcare services for Tennessee rural and underserved populations. Lawmakers should be encouraged to utilize existing infrastructure of patient-centered, physician-led, team-based care and fortify current programs, including health department clinics, federally qualified health centers, community and faith-based clinics, and Project Access initiatives to address their concerns about access to care in those communities.

Sunset: 2029

ADOPTED AS AMENDED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 05-22

INTRODUCED BY: EDWARD CAPPARELLI, MD
EX-OFFICIO DELEGATE

SUBJECT: TMA RESOLUTION ON PHYSICIAN WELLNESS

RESOLVED, That the Tennessee Medical Association make physician wellness efforts a priority, strengthening and expanding current regional programs being produced by the metro societies, focusing on raising awareness through CME programs, and increasing availability statewide for access to mental health services for physicians; and be it further

RESOLVED, That this be referred to the Board of Trustees for immediate action.

Sunset: 2029

NOT ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 07-22

INTRODUCED BY: KAYLA BUTTAFUOCO
MEDICAL STUDENT SECTION

SUBJECT: DISSOLUTION OF DAYLIGHT-SAVING TIME AND ADOPTION OF STANDARD
TIME

RESOLVED, That the Tennessee Medical Association view the transition between Standard Time to Daylight Saving time a public health issue

RESOLVED, That the Tennessee Medical Association studies the effects of Daylight Saving Time and Standard Time further and advocates for the adoption of a single time for the full year that will be best for health outcomes, costs, and the wellbeing of the people of Tennessee.

Sunset: 2029

ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 08-22

INTRODUCED BY: KALEEL WAINWRIGHT
NASHVILLE ACADEMY OF MEDICINE

SUBJECT: REQUIRED PROVISION AND TRACKING OF FENTANYL TESTING STRIPS BY
SYRINGE SERVICES PROGRAMS (SSPs)

RESOLVED, That the Tennessee Medical Association recognizes the increased role of fentanyl as a growing threat to public health and considerable source of mortality among Tennesseans; and be it further

RESOLVED, That the Tennessee Medical Association advocate for legal measures that require syringe services programs to distribute fentanyl test strips to individuals who request them and report the number of fentanyl test strips distributed in their annual reporting.

Sunset: 2029

ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 09-22

INTRODUCED BY: TMA BOARD OF TRUSTEES
JAMES W. CATES, JR., MD, CHAIR

SUBJECT: PRIOR AUTHORIZATION REFORM

RESOLVED That the Tennessee Medical Association makes improvement of payer prior authorization processes a top priority of the organization; and be it further

RESOLVED That the Tennessee Medical Association will work to reduce the number of medical and pharmacy services that require prior authorization; and be it further

RESOLVED That the Tennessee Medical Association will work to ensure patients receive needed care more expeditiously through the reduction of prior authorization delays and denials; and be it further

RESOLVED That the Tennessee Medical Association will work to institute measures to make prior authorization timelier and streamlined and with fewer burdens and retroactively denied payments for care; and be it further

RESOLVED That the Tennessee Medical Association supports federal efforts to reform prior authorization for Medicare Advantage plans and other federally regulated health insurance programs.

Sunset: 2029

ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 10-22

INTRODUCED BY: MICHAEL SCHNEIDER, MD
TENNESSEE DERMATOLOGY SOCIETY

SUBJECT: INDOOR TANNING REGULATION

RESOLVED, That the Tennessee Medical Association support the enactment of state legislation to protect minors from the hazards of tanning parlor rays by prohibiting the sale of tanning services utilizing ultraviolet rays to those under 18 years of age.

Sunset: 2029

REFERRED TO THE BOARD MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 11-22

INTRODUCED BY: REEVES JOHNSON, MD
KNOXVILLE ACADEMY OF MEDICINE

SUBJECT: SUPPORT AN EXTENDED PRESCRIPTION RENEWAL PERIOD IN TENNESSEE

RESOLVED, That the Tennessee Medical Association refer this to the Insurance Issues Committee to study the issue to determine an appropriate amount of extension time or other options for addressing this issue, including protocols for adoption.

Sunset: 2029

NOT ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 12-22

INTRODUCED BY: CHARLES LEONARD, MD
LAKEWAY MEDICAL SOCIETY

SUBJECT: ALL ABOARD

RESOLVED, That someone on the legislative committee, the lobbyist, the Board of Trustees, the president, or whoever has influence with a legislator or the governor, encourage the establishment of a two-way passenger rail system or some form of mass transit from Bristol to Memphis with important stops along the way.

Sunset: 2029

REFERRED TO THE BOARD MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 13-22

INTRODUCED BY: MICHELLE ALLMON, MD
TENNESSEE CHAPTER, AMERICAN COLLEGE OF PHYSICIANS

SUBJECT: COLLABORATIVE PHARMACY PRACTICE

RESOLVED, The Tennessee Medical Association advocate for HB2746/SB2188 being repealed, and be it further

RESOLVED, That if not repealed, TMA advocate for the addition of a requirement that the standardized fact sheet provided to patients include a statement that Ivermectin is not FDA approved treatment of COVID-19 and that there are FDA approved medications that are effective.

Sunset: 2029

ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 14-22

INTRODUCED BY: BOB VEGORS, MD
TENNESSEE CHAPTER, AMERICAN COLLEGE OF PHYSICIANS

SUBJECT: REQUEST FOR LEGAL IMMUNITY FOR PRESCRIBING BY PHYSICIANS

RESOLVED, That in the interest of legal consistency, Tennessee Medical Association advocate for immunity from disciplinary or adverse administrative actions for acts or omissions, including immunity from civil liability in the absence of gross negligence or willful misconduct, during the provision of any prescription or nonprescription medication by a physician licensed by the state of Tennessee and acting in good faith and with reasonable care.

Sunset: 2029

REFERRED TO THE BOARD MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 15-22

INTRODUCED BY: BOB VEGORS, MD
TENNESSEE CHAPTER, AMERICAN COLLEGE OF PHYSICIANS

SUBJECT: MODIFICATION OF 2021 TENNESSEE PERMITLESS HANDGUN CARRY LAW

RESOLVED, That Tennessee Medical Association advocate that all new firearm purchasers be required to complete a short video on firearm safety prior to receiving the firearm in person, with exceptions for active military; and police officers be it further

RESOLVED, That Tennessee Medical Association advocate for a statewide gun safety program in the public schools.

Sunset: 2029

REFERRED TO THE BOARD MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 16-22

INTRODUCED BY: TOM GALLAHER, MD
KNOXVILLE ACADEMY OF MEDICINE

SUBJECT: APPROPRIATE CREDENTIALING AND SUPERVISING OF MEDI-SPAS

RESOLVED, That the Tennessee Medical Association will implement an education campaign to members on how to make a complaint to the Board of Medical Examiners or Board of Osteopathic Medical Examiners when a physician is not appropriately overseeing an advanced practice registered nurse or physician assistant-owned practice.

Sunset: 2029

ADOPTED MAY 21, 2022

TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution No. 17-22

INTRODUCED BY: MICHAEL SCHNEIDER, MD
TENNESSEE DERMATOLOGY SOCIETY

SUBJECT: ENSURING VITILIGO PATIENTS ACCESS TO MEDICATIONS

RESOLVED, That the Tennessee Medical Association advocate for policy prohibiting health plans from making medical decisions that are between physicians and their patients concerning the treatment of vitiligo.

Sunset: 2029