ALIMDA Representation in the AMA House of Delegates

by Robert S. Long, M.D.
Associate Medical Director
Mutual of Omaha

To reach the bottom line first, I will state that after some rather dramatic and interesting maneuvers at the House of Delegates meeting in Las Vegas, ALIMDA was finally voted a seat in the House of Delegates on Tuesday, December 8, 1981, at about 3 p.m. The Speaker of the House directed those present who were representing the newly approved societies to proceed at once to the Credentials Committee and obtain the appropriate credentials and badge and to return to be seated in the House. Dr. Paul Metzger had delegated me to represent the Association, so I did just that and sat as a voting Delegate for the remainder of the session on Tuesday and on Wednesday until the House adjourned.

As you will all recall, we have been right up to the door at the annual meeting last summer and then the House of Delegates voted to return the recommendations for the 7 societies to the Board of Trustees for further study. The Board of Trustees did make a further study and did refer the matter to the Council on Long-Range Planning and Development as directed by the House. As you know, we had been encouraged by Dr. Cloud when he was with us in Boston, and Dr. Metzger had a letter from Dr. Jim Sammons dated November 5 in which he stated that the Board was going to consider the various applicants, of which 10 were pending, including ours, at its meeting immediately prior to the House of Delegates Session.

He further stated that the Board had already reviewed a report from the Council on Long-Range Planning and Development and this report was in the advance Delegate Handbook. This report stated in conclusion, "Recommendation: That the current mechanism for reviewing specialty society applicants for representation in the AMA House of Delegates be maintained." This was, in effect, a recommendation for the House to go ahead and approve those societies which had previously and would subsequently be approved by the Board of Trustees after their appropriate investigation using guidelines established by the Council on Long-Range Planning and Development and by the House of Delegates itself.

Dr. Metzger was notified by telephone at the last minute that the Board of Trustees had changed their recommendation, but we both went on out there anyway and found an additional report from the Board of Trustees which stated as one recommendation, "That the House of Delegates authorize the Board of Trustees to conduct a comprehensive study of the structure and size of the AMA House of Delegates and to submit recommendations for consideration by the House during the 1982 annual meeting, and that the House of Delegates take no action at this time on pending specialty society applications for representation in the House until such time as this study is completed and acted upon by the House."

This bothered us quite a lot as you might guess. It appeared to us that there has been so much political pressure put on the Board that they did not want to back a losing horse, and so they decided to back off and wait for the House to make a study of its own and establish new guidelines if that is what they wanted to do.

There had already been submitted to the House several resolutions from various state delegations asking for either a moratorium on any further admissions, asking for a two-thirds vote of the House for the admission of any new society, asking for limitation on the size of the House of Delegates with possibly even decertifying some of those specialty societies already seated, redefining a national medical specialty society and/or requesting that each physician be counted as a member of a stated medical association and only once more as a member of one medical specialty society in which the physician can vote and hold office, etc., etc. There appeared to be a lot of sentiment against admitting any more societies to the House and assigning them a seat as a voting Delegate.

On the Saturday afternoon prior to the opening of the House, we attended the meeting of the organized group of Delegates representing the Armed Forces and the specialty societies. They are identified by a rather long acronym which is not important. There was considerable discussion of this matter at that meeting. We found out there that the Chairman had previously appointed Dr. Bill Sodeman and 7 other members to form a Task Force to study this matter after the meeting last summer. Dr. Sodeman came in and did make a report and reported that 5 members of his group were strongly in favor of the current mechanism which had been established after a considerable amount of debate over a period of many years. Two members of the Task Force were semi-neutral and one was very much opposed to the admission of any additional members.
There was strong support at this meeting from Admiral J. William Cox, Surgeon General of the Navy, for maintaining the current guidelines and for admitting those societies which have been approved by the Board of Trustees and had been waiting patiently in the wings for several years. Fortunately, he was also on the Reference Committee for Amendments to the Constitution and Bylaws, to which the entire matter had been referred for discussion prior to the discussion and voting in the House of Delegates.

Many, many people spoke for and against both sides of this issue at the Reference Committee meeting. I made a pitch for ALIMDA and, of course, representatives of the other societies being considered had someone there to make a pitch for them. We had some support from various people including Dr. Sodeman. I spoke almost at the very end of the meeting and, in my comments, noted that there seemed to be a very strong sentiment in the Reference Committee for reconsideration of the entire make-up of the House of Delegates of AMA and that the Council on Long-Range Planning and Development already had such a study under way and about half completed and that they had recommended that the present method of electing Delegates from the specialty societies should be maintained.

I stated to the Reference Committee that I sensed also a strong consensus among the people who had spoken that those societies which had been waiting patiently for reports from the various Councils and who had waited patiently through a moratorium and then through another postponement last summer were entitled to be seated at this time. As a matter of fact, I additionally sensed that there were some feeling of guilt expressed, although I did not state that in so many words. Several people who had opposed the admission of additional societies last summer and who had opposed it on previous occasions did seem to admit rather indirectly that they thought that those who had complied with the current guidelines established by the House probably should be admitted, but certainly no one else should be.

When we left the Reference Committee, we felt quite certain that we would get a favorable report from the Reference Committee.

When we got the report of the Reference Committee at 7 o’clock the next morning, we found that they had indeed considered our position favorably. They had done it in a rather complex way because they had to consider and combine the report of the Board of Trustees on the matter, the report of the Council on Long-Range Planning and Development, and 5 different resolutions generally in opposition. They combined all of this into their report in which they recommended adoption of the Council on Long-Range Planning and Development report; recommended deleting from the Board of Trustees recommendation that part of it which called for non-action at this session on pending applicants; recommended that the Board report from last summer be recalled (this was the one that recommended 7 societies for representation) recommended that separate votes on each of the 7 applications be taken in the House of Delegates with a provision that a representative from each should have the privilege of the floor to present their credentials and information and to answer questions; and, finally, the Reference Committee recommended that the other parts of the reports and the resolutions be referred back to the Board of Trustees and the Council on Long-Range Planning and Development and the Council on Constitutional Bylaws to be submitted to the House of Delegates at the 1982 meeting.

We were looking pretty good at this point, but when we then attended some of the caucuses early in the morning before the House opened, we met a lot of resistance to this recommendation of the Reference Committee. We did get some encouragement from a few individuals.

When this matter finally came before the House of Delegates late in the morning on Tuesday, December 8, an old friend of ours of 20 years’ standing from ASIM days who has been a long-time Delegate from Georgia got the floor and asked for rearrangement of the report of the Reference Committee and moved that the first thing to be done was to recall the Board of Trustees report from last summer and to go ahead and vote on those societies who had been waiting in the wings for so long. He made really quite a good and effective emotional appeal including - "After all, no matter how you feel about it, fair is fair. They did comply with our own requirements and guidelines and they were approved by the Board of Trustees after appropriate study. We have put them off long enough and I think we should bring this to a vote right here and now." He got a second, and, to our great pleasure, that motion passed.

There was then a considerable amount of discussion as to whether the vote would be taken as recommended by the Reference Committee on each society separately or whether they should be voted as a group because they all met the same guidelines and all had been unanimously approved by the Board of Trustees. Dr. Dowda tried to prevail upon this method. We thought this would have been a great help to us because, among other people supporting a positive vote was Dr. Russell Roth, former Speaker of the House and a past President and a very strong and vocal man who was representing the American Association of Clinical Urologists. However, that motion failed and so we were back to individual consideration. By now it was past 12:30, so the House adjourned for lunch and we were still pretty much in mid-air.

Right after lunch when we returned and while there was still quite a lot of confusion and milling around with Delegates arriving, a motion was placed in the House that not only would the individual organizations be
considered separately but that it would be a secret ballot. My heart fell a little bit at this one because I thought this offered an opportunity for people to vote against us without being identified individually or as groups. I thought that if the great majority really wanted to vote for us, they would not mind standing up and being counted. As a matter of fact, Dr. Dowda thought the same thing and stated that he thought it was very unfair for the House to do this and that he thought everybody should be open and above-board and be willing to stand up and be counted and face up to their responsibilities. He was defeated, and a vote for a secret ballot passed.

At that point, the Speaker of the House stated that he would give 2 minutes to a representative from each society applying and if anyone was not there to represent his society, they would automatically be put off until next summer. We each had our 2 minutes and there seemed to be heavy emphasis upon total numbers and the total percent of members who belonged to AMA. Our figures were 704 total members and 72 percent AMA members. I am sure this is what got us by. Dr. Sodeman introduced me and made a very brief introduction, but a very appropriate one, indicating his high regard for ALIMDA and the fact that it was indeed a true medical specialty society that had made and would make considerable contributions.

I made essentially the same pitch as I have made many times before. The only question I was asked was to reiterate our numbers and percentage of AMA members. The votes were then collected and sent out for tally and the House went on with its business.

There was a brief discussion about whether or not the American Society of Cytology should be voted upon because they did not have a representative there to speak for them officially. One of the pathologists spoke very briefly about them but did not really know very much about them and did not really have much to state. They Speaker did give the figures indicating that they had an adequate number of members and an adequate number of AMA members and that their non-physician members were non-voting members of that society. Some people wanted to not vote for them, but others pointed out that the votes had already been made on the ballots and the ballots had been collected, so it was allowed that there would be a vote on them. They were the only one of the seven who failed. I think this is because they did not have a representative on the floor to make a more or less emotional pitch for their membership. They had had an excellent speaker present at the Reference Committee the day before. I think it’s too bad he did not wait over for his opportunity the next day.

As you might guess, Dr. Bob Katz and I were there together at that time as Dr. Metzger had been required to return to Ohio, and we were sitting on pins and needles for about 2 hours. Finally, I went out to the AMA office and obtained the vote which indicated that we had been given a seat by a vote of 165 to 106.

The votes on the other societies were as follows:

1. American Association of Clinical Urologists-201 for and 72 against.
2. American Society of Therapeutic Radiologists-196 for and 75 against.
3. American College of Nuclear Physicians-187 for and 86 against.
4. American Society of Gastrointestinal Endoscopy-166 for and 103 against.
5. Association of Life Insurance Medical Directors of America-165 for and 106 against.
6. American Orthopedic Association-144 for and 128 against.
7. American Society of Cytology-122 for and 144 against.

A quick analysis of this vote will indicate that 72 people were not going to vote for anyone under any circumstances at all. I judge this by the vote of the Clinical Urologists whose case had been pled by Dr. Russell Roth in a very vigorous, emotional, heart rending, convincing manner. He pointed out that they had been up for consideration for 5 consecutive years and that they had over 900 members, 100 percent of whom were AMA members and that there was just no reason why they should not have a seat in the House. I think that means that we did not really have 106 votes against us as an Association but probably 44 votes, because we did get only 46 more negative votes than the urologists and only 36 fewer votes for us. I think the against vote is probably the significant one.

Several people who had expressed opinions against seating any additional societies came to me later and offered congratulations and welcome, so I think, generally speaking, there is a good feeling about the whole thing with only a few die-hards who hated to get beat.

I think it is important for all of us to know who some of our particular friends are. First of all, of course, we would never have been there at all without the background work done during the past few years, particularly by Drs. Art Brown, Don Haskins, Paul Entmacher, Paul Metzger, and others. Attendance at meetings of the Inter specialty Advisory Board and contacts with Officers and Trustees of the AMA on many, many occasions were vital. Without the unanimous vote and support of the Board of Trustees of AMA, of course, we never would have arrived on the floor of the House to even try for a vote.

I think one of our very strongest and most vocal supporters, perhaps not for us individually but for the group and for the mechanism of election, was Admiral Cox. He is a strong man and an able speaker. We are very fortunate indeed that he was on the Reference Committee and helped write the Reference Committee Report.
When the matter came for consideration before the House, then our best friend was Dr. Bill Dowda from Georgia, and old friend of ours from ASIM, a past President of the Georgia Society of Internal Medicine and Georgia Medical Society and a long-time Delegate to the House of Delegates. I think we owe him one, and certainly we should do everything we can to support his candidacy for member of the Board of Trustees of the AMA at the meeting next summer.

Dr. Bill Sodeman was certainly a help to us. I was very happy to have his introduction to the House and very happy to have his report at the Reference Committee.

We found another friend who came to us voluntarily and offered to present us and speak for us on the floor of the House if necessary. That was an orthopedic surgeon from Springfield, Massachusetts, a good friend of Dr. Paul Nay's, and a good friend of the insurance industry and insurance medical directors generally. His name is Dr. Garry deNhough, III, M.D. He is a very nice gentleman and I am sure was helpful to us and encouraging.

I think additionally we were fortunate to have been considered at the same time as the American Association of Clinical Urologists because Dr. Russell Roth made such a very effective presentation for the principles involved, although, of course, he was speaking for his own group and not for us specifically.

In due time, the actions of the House will be reported in AM News on this matter and on the many, many other important items discussed and voted upon. I urge you all to watch for them because many of them are important to us as physicians and important to us as medical directors of insurance companies. I will prepare a report of some kind for the Executive Council meeting in April.

You can believe that I am very happy about the outcome and finally achieving a goal established many, many years ago, namely to be seated as a Delegate in the House of Delegates of AMA. I am very grateful to Dr. Paul Metzger for naming me to this position of honor and responsibility for the coming year. I am sure that he had the blessing of all of the officers and Executive Council.