

1 (21) RESOLUTION 223 - PROTECTING ACCESS TO  
2 GENDER AFFIRMING CARE  
3

4 **RECOMMENDATION A:**  
5

6 **The first Resolve of Resolution 223 be deleted.**  
7

8 ~~RESOLVED, That our American Medical Association work~~  
9 ~~with state and specialty societies and other interested~~  
10 ~~organizations to oppose any and all criminal and other legal~~  
11 ~~penalties against patients seeking gender affirming care~~  
12 ~~and against parents and guardians who support minors~~  
13 ~~seeking and receiving gender affirming care; including the~~  
14 ~~penalties of loss of custody and the inappropriate~~  
15 ~~characterization of gender affirming care as child abuse~~  
16 ~~(Directive to Take Action); and be it further~~  
17

18 **RECOMMENDATION B:**  
19

20 **The second Resolve of Resolution 223 be deleted.**  
21

22 ~~RESOLVED, That our AMA advocate for protections from~~  
23 ~~violence, criminal or other legal penalties, adverse medical~~  
24 ~~licensing actions, and liability, including responsibility for~~  
25 ~~future medical costs, for (a) healthcare facilities that provide~~  
26 ~~gender affirming care; (b) physicians and other healthcare~~  
27 ~~providers who provide gender affirming care; and (c)~~  
28 ~~patients seeking and receiving gender affirming care~~  
29 ~~(Directive to Take Action); and be it further~~  
30

31 **RECOMMENDATION C:**  
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33 **The third Resolve of Resolution 223 be deleted.**  
34

35 ~~RESOLVED, That our AMA work with state and specialty~~  
36 ~~societies and other interested organizations to advocate~~  
37 ~~against state and federal legislation that would prohibit or~~  
38 ~~limit gender affirming care (Directive to Take Action); and be~~  
39 ~~it further~~

**RECOMMENDATION D:**

**The fourth Resolve of Resolution 223 be deleted.**

~~RESOLVED, That our AMA work with other interested organizations to communicate with the Federation of State Medical Boards about the importance of preserving gender-affirming care despite government intrusions (Directive to Take Action); and be it further~~

**RECOMMENDATION E:**

**The fifth Resolve clause of Resolution 223 be amended by addition and deletion to read as follows:**

RESOLVED, That our AMA amend policy H-185.927, "Clarification of Medical Necessity for 16 Treatment of Gender Dysphoria," by insertion and deletion as follows:

**Clarification of Medical Necessity Evidence-Based Gender-Affirming Care for Treatment of Gender Dysphoria, H-185.927**

Our AMA: (1) recognizes that medical and surgical treatments for gender dysphoria and gender incongruence, as determined by shared decision making between the patient and physician, are medically necessary as outlined by generally-accepted standards of medical and surgical practice; (2) will work with state and specialty societies and other interested stakeholders to:

- A) advocate for federal, state, and local laws and policies to protect access to evidence-based ~~provide medically necessary~~ care for gender dysphoria and gender incongruence; and (3) opposes the criminalization and otherwise undue restriction of evidence-based gender-affirming care ~~will support legislation, ballot initiatives and state and federal policies to protect access to gender-affirming care.~~
- B) Oppose laws and policies that criminalize, prohibit or otherwise impede the provision of evidence-based, gender-affirming care, including laws and policies that penalize parents and guardians who support minors seeking and/or receiving gender-affirming care;
- C) Support protections against violence and criminal, civil, and professional liability for physicians and institutions that provide evidence-based, gender-affirming care and patients who seek and/or receive such care, as well as their parents and guardians; and

1 D) Communicate with stakeholders and regulatory bodies  
 2 about the importance of gender-affirming care for  
 3 patients with gender dysphoria and gender  
 4 incongruence. (Modify Current HOD Policy)  
 5

6 **RECOMMENDATION F:**  
 7

8 **Resolution 223 be adopted as amended.**  
 9

10 **HOD ACTION: Resolution 223 adopted as amended.**  
 11

12 RESOLVED, That our American Medical Association work with state and specialty  
 13 societies and other interested organizations to oppose any and all criminal and other legal  
 14 penalties against patients seeking gender-affirming care and against parents and  
 15 guardians who support minors seeking and receiving gender-affirming care; including the  
 16 penalties of loss of custody and the inappropriate characterization of gender-affirming care  
 17 as child abuse (Directive to Take Action); and be it further  
 18

19 RESOLVED, That our AMA advocate for protections from violence, criminal or other legal  
 20 penalties, adverse medical licensing actions, and liability, including responsibility for future  
 21 medical costs, for (a) healthcare facilities that provide gender-affirming care; (b)  
 22 physicians and other healthcare providers who provide gender-affirming care; and (c)  
 23 patients seeking and receiving gender-affirming care (Directive to Take Action); and be it  
 24 further  
 25

26 RESOLVED, That our AMA work with state and specialty societies and other interested  
 27 organizations to advocate against state and federal legislation that would prohibit or limit  
 28 gender-affirming care (Directive to Take Action); and be it further  
 29

30 RESOLVED, That our AMA work with other interested organizations to communicate with  
 31 the Federation of State Medical Boards about the importance of preserving gender-  
 32 affirming care despite government intrusions (Directive to Take Action); and be it further  
 33

34 RESOLVED, That our AMA amend policy H-185.927, "Clarification of Medical Necessity  
 35 for 16 Treatment of Gender Dysphoria," by insertion and deletion as follows:  
 36

37 **Clarification of Medical Necessity for Treatment of Gender Dysphoria, H-185.927**  
 38

39 Our AMA: (1) recognizes that medical and surgical treatments for gender dysphoria and  
 40 gender incongruence, as determined by shared decision making between the patient and  
 41 physician, are medically necessary as outlined by generally-accepted standards of  
 42 medical and surgical practice; (2) will advocate for federal, state, and local policies to  
 43 provide medically necessary care for gender dysphoria and gender incongruence; and (3)  
 44 ~~opposes the criminalization and otherwise undue restriction of evidence-based gender-~~  
 45 ~~affirming care~~ will support legislation, ballot initiatives and state and federal policies to  
 46 protect access to gender affirming care. (Modify Current HOD Policy)  
 47

48 Your Reference Committee heard testimony supporting the goals of Resolution 223.  
 49 Testimony expressed frustration at recent legislative actions that threaten the care and  
 50 health of transgender and gender diverse patients and urged our AMA to continue to

1 oppose the criminalization of evidence-based care. Your Reference Committee heard  
2 testimony in support of amended language to help refine the Resolution while maintaining  
3 the integrity of the original requests. Testimony also asked for there to be an emphasis on  
4 evidence-based care. Therefore, your Reference Committee recommends that Resolution  
5 223 be adopted as amended.

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7 (22) RESOLUTION 226 - VISION QUALIFICATIONS FOR  
8 DRIVER'S LICENSE  
9

10 **RECOMMENDATION A:**

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12 **Resolution 226 be amended by addition and deletion to**  
13 **read as follows:**

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15 RESOLVED, That our American Medical Association  
16 ~~engage with stakeholders including, but not limited to, the~~  
17 ~~American Academy of Ophthalmology, National Highway~~  
18 ~~Traffic Safety Commission, and interested state medical~~  
19 ~~societies, to make recommendations on support efforts to~~  
20 ~~make recommendations on~~ standardized vision  
21 requirements for unrestricted and restricted driver's  
22 licensing privileges. ~~(Directive to Take Action)~~ (New HOD  
23 Policy)  
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25 **RECOMMENDATION B:**

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27 **Resolution 226 be adopted as amended.**

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29 **HOD ACTION: Resolution 226 adopted as amended.**

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31 RESOLVED, That our American Medical Association engage with stakeholders including,  
32 but not limited to, the American Academy of Ophthalmology, National Highway Traffic  
33 Safety Commission, and interested state medical societies, to make recommendations on  
34 standardized vision requirements for unrestricted and restricted driver's licensing  
35 privileges. (Directive to Take Action)  
36

37 Your Reference Committee heard limited but supportive testimony on Resolution 226.  
38 Your Reference Committee heard that current vision requirements for operating motor  
39 vehicles may be outdated. Your Reference Committee further heard that there are data to  
40 recommend reconsideration of visual acuity standards in many states and studies have  
41 shown that drivers with visual acuity less than 20/50 can be safe and competent drivers.  
42 Testimony also highlighted that having an automatic reporting of a failed vision test to the  
43 Department of Motor Vehicles could cause individuals to not go and see their  
44 ophthalmologist resulting in negative health outcomes. Your Reference Committee also  
45 heard, however, that simplifying the Resolution to make it a policy statement would provide  
46 more flexibility to staff while still meeting the goals of the Resolution. Therefore, your  
47 Reference Committee recommends that Resolution 226 be adopted as amended.