



2025 Consent Calendar for the Reference Committee on Organization and Finance

National Conference of Constituency Leaders

The Reference Committee on Organization and Finance has considered each of the items referred to it and submits the following report. The committee's recommendations on each item will be submitted as a consent calendar and voted on in one vote. An item or items may be extracted for debate.

RECOMMENDATION: The Reference Committee on Organization and Finance recommends the following consent calendar for adoption:

Item 1: Reaffirm 1st Resolved Clause and Not Adopt 2nd Resolved Clause of Resolution No. 4001 "Expanding American Academy of Family Physicians Membership Benefits and Access for Medical School Graduates with Interest in Family Medicine".

Item 2: Adopt Substitute Resolution No. 4002 "Prioritizing International Medical Graduate Membership Resources" in lieu of Resolution No. 4002.

Item 3: Adopt Substitute Resolution No. 4003 "Securing American Academy of Family Physicians International Medical Graduate Member Data" in lieu of Resolution No. 4003.

Item 4: Adopt Substitute Resolution No. 4004 "Investigating Existing Health Impacts of Inequitable Access to Legal Services" in lieu of Resolution No. 4004.

Item 5: Adopt Resolution No. 4005 "Gender Pronouns in Health Care Documentation".

Item 6: Adopt Substitute Resolution No. 4006 "Stand By Diversity, Equity and Inclusion" in lieu of Resolution No. 4006.

Item 7: Adopt Substitute Resolution No. 4007 "Combating Medical Misinformation and Disinformation in the Digital Era" in lieu of Resolution No. 4007.

Item 8: Adopt Substitute Resolution No. 4008 "Supporting Practices in Paid Parental and Family Leave" in lieu of Resolution No. 4008.

Item 9: Adopt Substitute Resolution No. 4009 "Menopause Workplace Accommodations" in lieu of Resolution No. 4009.

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Item No. 1: Resolution No. 4001: Expanding American Academy of Family Physicians Membership Benefits and Access for Medical School Graduates with Interest in Family Medicine

RESOLVED, That the American Academy of Family Physicians grant membership to medical student graduates with interest in family medicine, including International Medical Graduates not yet enrolled in United States residency programs, and be it further

RESOLVED, That the American Academy of Family Physicians (AAFP) extend the free student membership to pre-residency trained medical student graduates beyond two years, allowing access to all AAFP resources to navigate a successful family medicine residency match.

The reference committee heard testimony all in favor of the resolution. Those testifying shared that IMGs make up 50% of the primary care workforce and more than 6,000 IMGs went unmatched due to inaccessibility to resources. It was shared that most IMGs can take longer to obtain residency than the two years provided as part of the membership criteria. Expanding the timeframe beyond two years would also be beneficial for other graduate students who are interested in changing their specialty and serves to encourage interest in family medicine. The reference committee discussed the transitional membership category and what the criteria are, since testimony and the resolution itself did not mention this membership type. Considering the overwhelming support for this topic, but also the confusion about what current membership types exist and what the terms are, it was difficult for the reference committee to be sure of the authors' specific intent. The reference committee understood and appreciated the need for the gap between medical school and residency to be solved for and will connect with the resolution authors to enhance future resolutions. As a result, the committee reaffirmed the first resolved clause and did not adopt the second resolved clause.

RECOMMENDATION: The reference committee recommends that Resolution No. 4001, 1st Resolved Clause, be reaffirmed as current policy.

RECOMMENDATION: The reference committee recommends that Resolution No. 4001, 2nd Resolved Clause, be not adopted.

Item No. 2: Resolution No. 4002: Prioritizing International Medical Graduate Membership Resources

RESOLVED, That the American Academy of Family Physicians (AAFP) create an opt-in checkbox on both new and renewal membership forms for all members to self-identify as IMGs on their individual AAFP profiles, and be it further

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RESOLVED, That the American Academy of Family Physicians create increased visibility on the website for content specific to International Medical Graduates so as not to be limited only to medical students, and be it further

RESOLVED, That the American Academy of Family Physicians use this opt-in information to connect interested members with relevant International Medical Graduate-specific resources, networking opportunities, mentorship, and timely updates regarding medical school application processes, residency application processes, visa sponsorships, J-1 waivers, and employment pathways.

The reference committee heard testimony in favor of the resolution. Members expressed that they believe they should be able to access important career information resources relevant to IMGs on the AAFP website that are similar to what is provided by United States medical schools but are unable. In addition to resources, supporting International Medical Graduate (IMGs') ability to connect and network could encourage recruitment for the specialty and membership with AAFP. The reference committee discussed the unique resource needs that IMG members have and the difficulty in finding those resources. When addressing the first resolved clause, the reference committee acknowledged that the American Academy of Family Physicians (AAFP) is already able to identify whether a member is an IMG based on their application data and chose to not adopt. There was discussion about addressing ways the AAFP could provide connection and networking opportunities for IMGs. Considering the charge of the existing Member Constituency Task Force, those concerns could be addressed in that forum. The reference committee acknowledged that despite work completed from a 2024 National Conference for Constituency Leaders (NCCL) resolution (Resolution No 2001: Creating a Foreign IMG Toolkit), there continues to be resource findability issues, especially in comparison to easily accessible resources for other members like students and residents. IMG members need an easy way to access the resources in place for them.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 4002, which reads as follows, be adopted in lieu of Resolution No. 4002:

RESOLVED, That the American Academy of Family Physicians improve visibility on the website for content specific to International Medical Graduates such as networking opportunities, mentorship, medical school application processes, residency application processes, visa sponsorships, J-1 waivers, and employment pathways.

Item No. 3: Resolution No. 4003: Securing American Academy of Family Physicians International Medical Graduate Member Data

RESOLVED, That the American Academy of Family Physicians securely encrypt its member data, including any data pertaining to its members' immigration status, and be it further

RESOLVED, That the American Academy of Family Physicians not disclose its member data to any law enforcement agency without a legal court order, court-ordered warrant, or subpoena.

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The reference committee heard testimony in favor of the resolution. Testimony shared noted that being an International Medical Graduate (IMG) holds a lot of stigma in the current healthcare system and members were grateful for the American Academy of Family Physicians' (AAFP) creation of a safe space for IMGs at National Conference for Constituency Leaders (NCCL). Considering the current administration's position on revoking immigration status and social media monitoring, the need to protect colleagues from deportation is paramount. Members expressed appreciation of the wording as it was inclusive of all demographic data, not just immigration status. Inclusive language to protect data is important when search and seizure can be used against someone. The reference committee acknowledged that immigration status is being actively targeted by the current administration and that critical identifiers should be kept private. There was discussion about encryption and the difference between secured data vs. encrypted data. AAFP staff shared current security and encryption practices with the reference committee. The reference committee felt comfortable that current AAFP practices support these concerns and that sensitive data is secured appropriately. Since the second resolved clause exists as current policy, it's not included in the substitution.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 4003, which reads as follows, be adopted in lieu of Resolution No. 4003:

RESOLVED, That the American Academy of Family Physicians securely encrypt its member data, including any data pertaining to its members' immigration status.

Item No. 4: Resolution No. 4004: Investigating Existing Health Impacts of Inequitable Access to Legal Services

RESOLVED, That the American Academy of Family Physicians investigate existing research on the health impacts of inequitable access to legal services, and be it further

RESOLVED, That the American Academy of Family Physicians adopt a policy or position paper on the health impacts of inequitable access to legal services.

The reference committee heard testimony that was in favor of understanding the impacts to the large percentage of the population unable to access legal services, how this can impact their ability to access services generally, and the downstream effect to their overall health. Access to legal services should be researched and considered for its impact on health. The reference committee determined that research exists in the field, though not necessarily completed by the AAFP, that could support a position paper or policy on this topic.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 4004, which reads as follows, be adopted in lieu of Resolution No. 4004:

RESOLVED, That the American Academy of Family Physicians create an evidence-based policy or position paper on the health impacts of inequitable access to legal services.

Item No. 5: Resolution No. 4005: Gender Pronouns in Health Care Documentation

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RESOLVED, That the American Academy of Family Physicians issue a statement encouraging health care entities to continue current practices which allow patients to self-identify their gender identity in the medical record.

The reference committee heard testimony all in favor of the resolution. Those testifying expressed that the current administration's position on sex and gender has the potential to create more barriers in addition to those that already exist for this population, including but not limited to access to care and lack of insurance coverage. The current policies put pressure on people to only recognize a gender binary and to tell someone that their gender isn't real, effectively erasing people. There is potential for great harm to be done without a patient's consent and could force physicians to do something they aren't comfortable doing. The reference committee felt that the testimony and resolution itself were very clear about the importance of reaffirming the American Academy of Family Physicians position and policy.

RECOMMENDATION: The reference committee recommends that Resolution No. 4005 be adopted.

Item No. 6: Resolution No. 4006: Stand By Diversity, Equity and Inclusion

RESOLVED, That the American Academy of Family Physicians reaffirm commitment to diversity, equity, and inclusion in education, physician workforce, medical practice, health policy, and patient care, and be it further

RESOLVED, That the American Academy of Family Physicians (AAFP) release statements that reaffirm the AAFP's dedication to diversity, equity, and inclusion to both membership and the general public.

The reference committee heard unanimously supportive testimony. The American Academy of Family Physicians (AAFP) was generally commended for its commitment to diversity, equity and inclusion. The need was reinforced for a clear and unequivocal statement to both membership and the public of this support. Further sentiment expressed that a respected organization such as the AAFP speaking out will help smaller groups, which might not feel comfortable taking a public stand. The reference committee discussed the need to reaffirm the existing policy/position with a statement to publicly affirm. The reference committee chose to reaffirm the first resolved clause since existing policy and language the AAFP uses supports this resolution.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 4006, which reads as follows, be adopted in lieu of Resolution No. 4006:

RESOLVED, That the American Academy of Family Physicians (AAFP) release additional statements that reaffirm the AAFP's dedication to diversity, equity, and inclusion to both membership and the general public.

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Item No. 7: Resolution No. 4007: Combating Medical Misinformation and Disinformation in the Digital Era

RESOLVED, That the American Academy of Family Physicians develop a policy statement that opposes medical disinformation and misinformation and create a task force to address the in-creasing prevalence of medical misinformation, and be it further

RESOLVED, That the American Academy of Family Physicians combat medical misinformation and disinformation through an active social media presence focused on sharing evidence-based health information, and be it further

RESOLVED, That the American Academy of Family Physicians support the development of member-accessible toolkits, patient-facing materials and digital resources to equip family physicians in addressing misinformation during patient care and community engagement.

The reference committee heard testimony in favor of the resolution. Members expressed the importance of the American Academy of Family Physicians (AAFP) taking a stance on the harmful effects of medical misinformation and disinformation. Broadly, the reference committee agreed with the resolution. They also acknowledged that AAFP is already providing a significant amount of evidence-based information and that trying to address all the misinformation and disinformation could cause undue burden. Considering that a task force can only be created by the AAFP Board of Directors, the reference committee removed that language and adopted a substitute.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 4007, which reads as follows, be adopted in lieu of Resolution No. 4007:

RESOLVED, That the American Academy of Family Physicians develop a policy statement that opposes medical disinformation and misinformation, and be it further

RESOLVED, That the American Academy of Family Physicians maintain an active social media presence focused on sharing evidence-based health information, and be it further

RESOLVED, That the American Academy of Family Physicians support the development of member-accessible toolkits, patient-facing materials and digital resources to equip family physicians in addressing misinformation during patient care and community engagement.

Item No. 8: Resolution No. 4008: Supporting Practices in Paid Parental and Family Leave

RESOLVED, That the American Academy of Family Physicians develop a policy on parental and/or family leave that lasts for at least 12 weeks and is separate from vacation and sick time for new parents, and be it further

RESOLVED, That the American Academy of Family Physicians explore existing relationships with locum tenens agencies to leverage collective bargaining to help physicians locate a provider to continue their daily work in practice, and be it further

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RESOLVED, That the American Academy of Family Physicians explore the feasibility of providing temporary short-term disability style coverage for physicians that take parental or family leave.

The reference committee heard testimony from multiple constituencies in support of the resolution. The Family Medical Leave Act (FMLA) is available but with limitations that can be prohibitive, especially the lack of paid leave. Members shared additional limitations including exhausting existing sick leave and vacation time before FMLA could be used. The use of gender-neutral language in the resolution was also appreciated, ensuring that anybody can access and utilize the leave described. The reference committee discussed the outcome of a 2024 National Conference of Constituency Leaders (NCCL) Resolution (Resolution No. 1004: Advocate for 12 Weeks Paid Parental Leave) that was referred to the Commission on Federal and State Policy as being accepted for information. The committee also discussed the detailed leave policy for physicians in residency, noting that an AAFP policy does not exist for physicians outside of residency. The reference committee was generally in favor of the AAFP connecting members with leave-support resources but chose to adopt a substitute to the second resolved clause to make the language broader. There was also vigorous discussion regarding the cost of short-term insurance and whether qualifying the type as temporary was necessary to include. Ultimately, the reference committee chose to adopt a substitute to the third resolved clause to remove limitations on the type of coverage.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 4008, which reads as follows, be adopted in lieu of Resolution No. 4008:

RESOLVED, That the American Academy of Family Physicians develop a policy on paid parental and/or family leave, separate from existing vacation or sick leave, that lasts for at least 12 weeks, and be it further

RESOLVED, That the American Academy of Family Physicians explore existing relationships such as locum tenens agencies to help physicians locate a provider to continue their practice, and be it further

RESOLVED, That the American Academy of Family Physicians explore the feasibility of providing short-term disability style coverage for physicians utilizing parental or family leave.

Item No. 9: Resolution No. 4009: Menopause Workplace Accommodations

RESOLVED, That the American Academy of Family Physicians develop a policy in support of workplace accommodations for people experiencing menopause, and be it further

RESOLVED, That the American Academy of Family Physicians adopt and implement the work-place recommendations set forth by The Menopause Society in its 2024 Menopause and the Workplace: Consensus Recommendations, and be it further

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RESOLVED, That the American Academy of Family Physicians evaluate and amend its internal employment policies to ensure that all staff experiencing menopause receive appropriate support, flexibility and access to resources necessary for their continued well-being and professional success.

The reference committee heard testimony all in favor of the resolution. Members expressed that supporting people who experience menopause, considering that they are half of the population, would aid them in working better and more efficiently. The reference committee questioned the specific call out for the Menopause Society and discussed whether the Menopause Society was the best place to get these recommendations. The discussion prompted some additional questions relative to how the American Academy of Family Physicians (AAFP) would practically adopt and implement their recommendations. The reference committee discussed the third resolved clause and felt that since its focus was on AAFP staff and didn't consider other accommodations that could be needed, it could invite discussion about topics that are best dealt with in different forums.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 4009, which reads as follows, be adopted in lieu of Resolution No. 4009:

RESOLVED, That the American Academy of Family Physicians develop a policy in support of workplace accommodations for people experiencing menopause, and be it further

RESOLVED, That the American Academy of Family Physicians adopt and implement the work-place recommendations set forth by The Menopause Society in its 2024 Menopause and the Workplace: Consensus Recommendations.



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I wish to thank those who appeared before the reference committee to give testimony and the reference committee members for their invaluable assistance. I also wish to commend the AAFP staff for their help in the preparation of this report.

Respectfully Submitted,

Toussaint Mears-Clarke, MD, MBA, FAAFP – CHAIR

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