



## 2026 Agenda for the Reference Committee on Organization and Finance

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National Conference of Constituency Leaders

### **Item No.**

1. Resolution No. 4001: American Academy of Family Physicians to Support Retention of Health Disparities Curricula in Medical Education
2. Resolution No. 4002: Continuation of Previous Resolution of Fair Bilingual Compensation
3. Resolution No. 4003: Oral Health Care as Primary Care
4. Resolution No. 4004: Reproductive Health Training Database for Family Physicians
5. Resolution No. 4005: Enhancing Procedural Training for Family Physicians
6. Resolution No. 4006: Enhancing Awareness and Accessibility of AAFP Tools and Resources for International Medical Graduates
7. Resolution No. 4007: A Collaborative Model for Continuous Updating of International Medical Graduate (IMG) Resources with IMG-Family Medicine Expert Involvement

## **RESOLUTION NO. 4001**

### **American Academy of Family Physicians to Support Retention of Health Disparities Curricula in Medical Education**

Introduced by: L. Latéy Bradford, MD, PhD, New Physician  
Preciosa Pacia-Rantayo, MD, IMG  
Haley Coleman, MD, General Registrant

WHEREAS, Health disparity education is crucial in family medicine to reduce systemic healthcare inequalities, improve health outcomes for vulnerable populations and address social determinants of health, and

WHEREAS, there are medical education accreditation bodies that have voted to remove standards for health disparities education in medical school education, and

WHEREAS, failing to train physicians in health disparities leaves them unprepared to navigate the complex social and structural realities of their patients' lives, ultimately widening the gap in health outcomes and quality of care, and

WHEREAS, The American Academy of Family Physicians launched The EveryONE Project to empower and provide resources to practicing family physicians to advance health equity in their communities, but there is no specific tool designed to train students and residents in health equity, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians advocate for the preservation and strengthening of medical school standards that support medical education on health inequities, social determinants of health and health disparities, and be it further

RESOLVED, That the American Academy of Family Physicians expand existing initiatives, including The EveryONE Project, to include training modules on health disparities specifically designed for medical students and residents, and be it further

RESOLVED, That the American Academy of Family Physicians disseminate the new content, including a revamped EveryONE Project, for health disparities training of medical students and residents through avenues such as Family Medicine Interest Groups and residency programs.

## **RESOLUTION NO. 4002**

### **Continuation of Previous Resolution of Fair Bilingual Compensation**

Introduced by:           Gerica Alvarado, MD, BIPOC  
                                  Tamara Huson, MD, FAAFP, BIPOC

WHEREAS, The United States (U.S.) population is increasingly more linguistically diverse and the number of people who speak a language other than English at home nearly tripled from 23.1 million (about 1 in 10) to 67.8 million (about 1 in 5) from 1980 to 2019, according to the US Census Bureau, and

WHEREAS, Resolution No. 103 was previously accepted for information in order to gather initial data and begin to assess if and how the American Academy of Family Physicians (AAFP) could advocate on this in the future with the upcoming AAFP Career Benchmark Survey, and

WHEREAS, recent data from the AAFP Career Benchmark survey shows only 0.5% of family physicians report receiving compensation for being multilingual or certified in language proficiency despite 39.7% of physicians reporting speaking a language other than English, and

WHEREAS, language-discordant care leads to poorer health outcomes and places a higher financial burden on the health-care system for patients who cannot effectively communicate with their physician, and

WHEREAS, studies have shown that language-congruency in medical care improves clinical outcomes and can lead to increased clinical efficiency and decreased healthcare spending, and

WHEREAS, bilingual employees across American industries are typically incentivized with 5-20% wage and salary increases compared to single-language-speaking employees, and

WHEREAS, the Office of Management and Budget (OMB) estimates that the cost for professional interpreters varies from \$20-\$26 per hour and utilization of bilingual physicians lowers costs by streamlining interpretation and more efficiently conducting the patient encounter, and

WHEREAS, the AAFP supports legislation to make funding available for culturally-sensitive interpretive services for those who have limited English proficiency, who are deaf, or who are otherwise language impaired (October 2023 COD), now, therefore, be it

RESOLVED, That the American Academy of Family Physicians (AAFP) advocate for the inclusion of compensation for patient-congruent certified language proficiency in physician contracts based on recently released data from the AAFP Career Benchmark Survey as stated in Resolution No. 103.

## **RESOLUTION NO. 4003**

### **Oral Health Care as Primary Care**

Introduced by:           Sabrina Martinez, MD, BIPOC  
                                  Madie Hartman, DO, BIPOC  
                                  Cynthia Mahin, MD, BIPOC  
                                  Malinda Ellis, MD, BIPOC  
                                  Gerica Alvarado, MD, BIPOC  
                                  Jonnae Atkinson, MD, General Registrant

WHEREAS, Oral health is strongly associated with the optimization of a myriad of medical conditions including diabetes, cardiovascular disease, pregnancy, and postoperative complications, and

WHEREAS, the American Academy of Family Physicians has previously affirmed the importance of oral health integration and states that all individuals should have access to age-appropriate dental services, but lacks comprehensive, actionable guidance on pathways for coverage to allow for implementation; and the American Dental Association strongly advocates for comprehensive coverage of preventive dental services, urging insurance plans to cover at least two annual visits including cleaning, risk assessments, fluorides, and sealants, and

WHEREAS, significant barriers exist to implementing oral health services, including inadequate reimbursement structures, lack of sustainable funding mechanisms, and limited access to practical implementation resources, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians reaffirm that oral health is a fundamental component of preventative primary care, and be it further

RESOLVED, That the American Academy of Family Physicians collaborate with strategic stakeholders to develop practical guidance on universal dental coverage that include preventative oral health services as integral primary care services, and be it further

RESOLVED, That American Academy of Family Physicians guidance for dental coverage include strategies through mechanisms such as Medicare, Medicaid, reimbursement models, grant opportunities, value-based care initiatives, and alternative payment models.

## **RESOLUTION NO. 4004**

### **Reproductive Health Training Database for Family Physicians**

Introduced by: Astrud Villareal, MD, Women  
Jiana Menendez, MD, BIPOC  
Mary Kristine Ellis, MD, Women  
Mariela Cabrera, MD, General Registrant  
Tulsi Patel, MD, Women  
Catherine Casado-Pabon, MD, Women

WHEREAS, The Accreditation Council for Graduate Medical Education (ACGME) requires residents to complete at least 100 hours (or one month) dedicated to the care of patients with gynecologic issues, including obstetric and gynecologic care, family planning, contraception, and options education for unintended pregnancy, and

WHEREAS, the American Academy of Family Physicians (AAFP) already supports the integration of a longitudinal, trauma-informed LGBTQ+ healthcare curriculum across medical education and provide its existing high-quality LGBTQ+ health training modules at no additional cost to all members, and

WHEREAS, the AAFP already encourages that all family medicine residency programs ensure residents receive accurate education on medications for miscarriage management and abortion in order to promote informed counseling and safe follow-up care, and

WHEREAS, a significant gap in reproductive health training persists in family medicine residency programs, as only 7% include routine training in early abortion care, and although more than half of programs report offering some abortion training, much of it is elective while approximately 40% of residency programs lack such training entirely, and

WHEREAS, reproductive health organizations that provide training opportunities for family physicians exist, such as Repro TLC, TEACH, and the Reproductive Health Access Project (RHAP), many of these programs are unknown or inaccessible to interested learners, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians establish an active database for reproductive health training programs that provides direct patient care experiences in abortion, gender-affirming care, and procedural contraception for residents and post-graduate family physicians.

## **RESOLUTION NO. 4005**

### **Enhancing Procedural Training for Family Physicians**

Introduced by:           Richard Carlino, MD, New Physicians  
                                  Amanda McKeith, MD, New Physicians  
                                  Anthony Carter, MD, New Physicians  
                                  Sachin Jindal, MD, New Physicians  
                                  Hannah DePoy-Pratt, DO, New Physicians  
                                  Doreen Amankwah Owusu, MD, New Physicians  
                                  Liana Kobayashi, DO, New Physicians

WHEREAS, The American Board of Family Medicine has recently changed residency procedural requirements for board eligibility impacting new physician procedural confidence and competence, and

WHEREAS, physicians may be unable to meet procedural needs of their communities or may be interested in renewing procedural skills or serving a new population, and

WHEREAS, family physicians have a responsibility to provide care, including procedural care, to their communities who may lack access to specialty services, and

WHEREAS, procedural competence and confidence is of utmost importance to physicians, patients, and their communities, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians explore longitudinal, competency-based, hands-on procedural training for practicing physicians, which may include online training and hands-on skill sessions, and be it further

RESOLVED, That the American Academy of Family Physicians (AAFP) investigate mentorship for longitudinal procedural skills, which may include ongoing feedback from AAFP faculty after continuing medical education workshops.

**RESOLUTION NO. 4006**

**Enhancing Awareness and Accessibility of AAFP Tools and Resources for International Medical Graduates**

Introduced by:           Ambreen Warsy, MD, IMG  
                                  Agnes Serranilla-Sonido, MD, IMG

WHEREAS, The American Academy of Family Physicians offers valuable tools, resources and professional development opportunities that may not be fully known or easily accessible to incoming IMGs, particularly during early training and transition periods, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians (AAFP) develop structured orientation programs tailored to the needs of International Medical Graduates, focusing on pathways, tools and leadership that the AAFP provides.

## **RESOLUTION NO. 4007**

### **A Collaborative Model for Continuous Updating of International Medical Graduate (IMG) Resources with IMG-Family Medicine Expert Involvement**

Introduced by: Benjamin Lai, MD, IMG  
Jose Rodriguez-Garcia, MD, IMG  
Kostas Dewertzis, MD, IMG  
Natalie Wietfeldt, MD, IMG  
Maha Srinivasan, MD, IMG  
Blessing Kenna Enudu, MD, IMG  
Veronica Ruiz, MD, IMG

WHEREAS, The current American Academy of Family Physicians (AAFP) International Medical Graduate (IMG) Member Constituency webpage contains a number of links and resources for IMGs, some of the materials are outdated (e.g. the link to Guidelines for International Medical Graduates Who Wish to Enter a US Training Program was published in January 2011), and

WHEREAS, the AAFP Commission on Education is already addressing education-related matters for family medicine residencies, but nothing specific to IMGs and nothing specific to individuals not already in residency, and

WHEREAS, there are major and ongoing changes related to certification and pathway requirements (e.g. overhauls in United States Medical Licensing Examination exam structure) in order to apply for residency programs, including family medicine, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians creates, maintains and updates resources and toolkits to guide international medical graduates pursuing family medicine residency training, and be it further

RESOLVED, That the American Academy of Family Physicians will include international medical graduate (IMG) family physicians to serve as subject matter experts to participate in the process of creating and updating IMG-specific resources and updates.