

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 414
(A-24)

Introduced by: California

Subject: Addressing the Health Sector's Contributions to the Climate Crisis

Referred to: Reference Committee D

1 Whereas, the sharp rises of greenhouse gas (GHG) emissions has already warmed the planet
2 by more than 1.2°C over pre-industrial levels, which has negatively affected public health;¹ and
3

4 Whereas, globally, the U.S. health care sector is responsible for 25% of all health care GHG
5 emissions, more than any other country;² and
6

7 Whereas, health care organizations spend over \$6.5 billion on energy each year, with that
8 amount rising to meet patients' needs;³ and
9

10 Whereas, effective use of virtual health services can also reduce emissions in the health care
11 sector by reducing patient travel to physician offices and facilities;⁴ and
12

13 Whereas, "greenwashing" occurs when an entity makes a misleading claim or implies to
14 consumers that a product or service is environmentally friendly or has a greater positive
15 environmental impact than it actually does;⁵ and
16

17 Whereas, many physicians and health care facilities are looking for more sustainable and
18 environmentally friendly health care equipment and medications and can thus be vulnerable to
19 claims of "greenwashing" because the environmental reporting standards for health care
20 products can contain gaps that can make interpretation difficult and inconsistent;⁶ and
21

22 Whereas, the Securities and Exchange Commission (SEC) has proposed rule changes that
23 would require, among other things, GHG emissions reporting by all registrants, which would
24 also require reporting of a company's climate targets, how they will meet those goals, and data
25 on their progress and how that progress was achieved;⁷ and
26

27 Whereas, the Inflation Reduction Act (IRA) has allocated almost \$400 billion toward efforts to
28 increase green energy and reduce carbon emissions;^{8,9} and
29

30 Whereas, the IRA also allocated \$3 billion to fund an environmental justice grant program to
31 provide grants to community-based organizations in disadvantaged communities;^{8,9} and
32

33 Whereas, in March 2023, the Centers for Medicare and Medicaid Services (CMS) issued a
34 categorical waiver that would allow most health care facilities to use a health care microgrid
35 system (HCMS) as a source of emergency power;¹⁰ and
36

37 Whereas, HCMS power sources can rely entirely on, or be supplemented by, a combination of
38 clean energy technologies, which include fuel cells, solar panels, wind turbines, and energy
39 storage systems;¹⁰ and

1 Whereas, our AMA has extensive policy establishing climate changes as a public health crisis,
2 supporting measurable targets for limiting global warming, reducing greenhouse gas emissions,
3 and encouraging the health sector to lead by example but does not have specific policy related
4 to efforts specific to the health care sector; therefore be it
5

6 RESOLVED, that our American Medical Association recognizes that clinical quality and safety
7 should not be sacrificed as strategies for reducing greenhouse gasses and waste (New HOD
8 Policy); and be it further
9

10 RESOLVED, that our AMA recognizes that animal-based agriculture is a significant contributor
11 to greenhouse gas emissions and supports efforts to increase and promote plant-based menu
12 options in hospital food services, for both health and environmental reasons (New HOD Policy);
13 and be it further
14

15 RESOLVED, that our AMA expects that health systems will provide transparency and avoid
16 misleading the public regarding their greenhouse gas emissions, including but not limited to
17 providing definitions used in the calculations of their net-zero emissions (New HOD Policy); and
18 be it further
19

20 RESOLVED, that our AMA opposes corporate “greenwashing,” or the act of making misleading
21 statements about the environmental benefits of products and/or services (New HOD Policy);
22 and be it further
23

24 RESOLVED, that our AMA supports the development of locally managed and reliable electrical
25 microgrids that operate independently from the larger electrical grid for hospitals and other
26 health care facilities to use as a way to reduce reliance on diesel generation for back-up
27 services while maintaining critical care functions during emergencies and supports grants being
28 provided to independent practices to facilitate this development (New HOD Policy); and be it
29 further
30

31 RESOLVED, that our AMA supports the use of virtual health care, where appropriate, with
32 reasonable reimbursement, as a strategy to reduce the carbon footprint of health care (New
33 HOD Policy); and be it further
34

35 RESOLVED, that our AMA support financial assistance for health care entities, including
36 community health centers, clinics, rural health centers, small- and medium-sized physician
37 practices, transitioning to environmentally sustainable operations (New HOD Policy); and be it
38 further
39

40 RESOLVED, that our AMA support the development of concise clinical guidelines and patient
41 education materials to assist physician practices and patients to reduce adverse organizational
42 and personal impacts on climate change. (New HOD Policy)
43

Fiscal Note: Minimal - less than \$1,000

Received: 4/23/2024

REFERENCES

1. Watts N., Amann M., et. al. The 2020 Report of The Lancet Countdown on Health and Climate Change: Responding to Converging Crises. LANCET (January 2021), available at [https://doi.org/10.1016/S0140-6736\(20\)32290-X](https://doi.org/10.1016/S0140-6736(20)32290-X). PMID: 33278353.
2. Eckelman M. J., Huang K., Lagasse R., et. al. (2020). Health Care Pollution and public health damage in the United States: An update. Health Affairs, 39(12), 2071–2079. <https://doi.org/10.1377/hlthaff.2020.01247>.
3. *Healthcare: An overview of energy use and energy efficiency opportunities*, ENERGY STAR website at <https://www.energystar.gov/ia/partners/publications/pubdocs/Healthcare.pdf>.
4. Schneider, Mary E. (2023) *Do no harm: Is health care polluting the earth?* American Society of Hematology Clinical News. <https://ashpublications.org/ashclinicalnews/news/7228/Do-No-Harm-Is-Health-Care-Polluting-the-Earth>.
5. Gordon, D. & Zuegge, K.L. (2020). Greenwashing in health care marketing. American Society of Anesthesiologists Monitor, 84, 18–21. <https://pubs.asahq.org/monitor/article/84/4/18/108451/Greenwashing-in-Health-Care-Marketing>.
6. Leah Kirts, *How to Avoid Greenwashing, According to the Experts*, CNN UNDERSCORED (April 28, 2023), available at <https://www.cnn.com/cnn-underscored/home/what-is-greenwashing>.
7. *Press release: SEC Proposes Rules to Enhance and Standardize Climate-Related Disclosures for Investors*. Securities and Exchange Commission, Securities and Exchange Commission website at <https://www.sec.gov/news/press-release/2022-4>.
8. *What Climate Change Means for California*, United States Environmental Protection Agency website at <https://19january2017snapshot.epa.gov/sites/production/files/2016-09/documents/climate-change-ca.pdf>.
9. *Building a Clean Energy Economy: A Guidebook to the Inflation Reduction Act's Investments in Clean Energy and Climate Action*, THE WHITE HOUSE (January 2023), available at <https://www.whitehouse.gov/wp-content/uploads/2022/12/Inflation-Reduction-Act-Guidebook.pdf>.
10. *Categorical Waiver – Health Care Microgrids Systems (HCMSs)*, Centers for Medicare & Medicaid Services website at <https://www.cms.gov/files/document/qso-23-11-lsc.pdf>.

RELEVANT AMA POLICY

H-135.938 Global Climate Change and Human Health

Our AMA: 1. Supports scientific consensus that the Earth is undergoing adverse global climate change and that anthropogenic contributions are significant. These climate changes have adversely affected the physical and mental health of people. We recognize that minoritized and marginalized populations, children, pregnant people, the elderly, rural communities, and those who are economically disadvantaged will suffer disproportionate harm from climate change. 2. Supports educating the medical community on the adverse public health effects of global climate change and incorporating the health implications of climate change into the spectrum of medical education, including topics such as population displacement, heat waves and drought, flooding, infectious and vector-borne diseases, and potable water supplies. 3. (a) Recognizes the importance of physician involvement in policymaking at the state, national, and global level and supports efforts to search for novel, comprehensive, and economically sensitive approaches to mitigating climate change to protect the health of the public; and (b) recognizes that whatever the etiology of global climate change, policymakers should work to reduce human contributions to such changes. 4. Encourages physicians to assist in educating patients and the public on the physical and mental health effects of climate change and on environmentally sustainable practices, and to serve as role models for promoting environmental sustainability. 5. Encourages physicians to work with local and state health departments to strengthen the public health infrastructure to ensure that the global health effects of climate change can be anticipated and responded to more efficiently, and that adaptation interventions are equitable and prioritize the needs of the populations most at risk. 6. Supports epidemiological, translational, clinical and basic science research necessary for evidence-based global climate change policy decisions related to health care and treatment. 7. Encourages physicians to assess for environmental determinants of health in patient history-taking and encourages the incorporation of assessment for environmental determinants of health in patient history-taking into physician training. [Modified: CSAPH Rep. 2, I-22; Modified: Res. 424, A-22; Reaffirmation: I-19; Reaffirmed: CSAPH Rep. 04, A-19; Reaffirmation A-14; CSAPH Rep. 3, I-08]

D-135.966 Declaring Climate Change a Public Health Crisis

1. Our AMA declares climate change a public health crisis that threatens the health and well-being of all individuals. 2. Our AMA will protect patients by advocating for policies that: (a) limit global warming to no more than 1.5 degrees Celsius, (b) reduce US greenhouse gas emissions aimed at a 50 percent reduction in emissions by 2030 and carbon neutrality by 2050, and (c) support rapid implementation and incentivization of clean energy solutions and significant investments in climate resilience through a climate justice lens. 3. Our AMA will consider signing on to the Department of Health and Human Services Health Care Pledge or making a similar commitment to lower its own greenhouse gas emissions. 4. Our AMA encourages the health sector to lead by example in committing to carbon neutrality by 2050. 5. Our AMA will develop a strategic plan for how we will enact our climate change

policies including advocacy priorities and strategies to decarbonize physician practices and the health sector with report back to the House of Delegates at the 2023 Annual Meeting.
[Appended: CSAPH Rep. 02, I-22; Res. 420, A-22]

H-150.949 Healthful Food Options in Health Care Facilities

1. Our AMA encourages healthful food options be available, at reasonable prices and easily accessible, on the premises of health care facilities. 2. Our AMA hereby calls on all health care facilities to improve the health of patients, staff, and visitors by: (a) providing a variety of healthy food, including plant-based meals, and meals that are low in saturated and trans fat, sodium, and added sugars; (b) eliminating processed meats from menus; and (c) providing and promoting healthy beverages. 3. Our AMA hereby calls for health care facility cafeterias and inpatient meal menus to publish nutrition information. 4. Our AMA will work with relevant stakeholders to define “access to food” for medical trainees to include overnight access to fresh food and healthy meal options within all training hospitals.

[Appended: Res. 304, A-21; Modified: Res. 904, I-19; Modified: Res. 425, A-18; Appended: Res. 406, A-17; Reaffirmed: CSAPH Rep. 1, A-14; Res. 410, A-04]

G-630.135 Eliminating Food Waste Through Recovery

Our AMA will: (1) consider sustainability and mitigation of food waste in vendor and venue selection; and (2) encourage vendors and relevant third parties to practice sustainability and mitigate food waste through donations.

[Res. 603, A-18]

H-135.939 Green Initiatives and the Health Care Community

Our AMA supports: (1) responsible waste management and clean energy production policies that minimize health risks, including the promotion of appropriate recycling and waste reduction; (2) the use of ecologically sustainable products, foods, and materials when possible; (3) the development of products that are non-toxic, sustainable, and ecologically sound; (4) building practices that help reduce resource utilization and contribute to a healthy environment; (5) the establishment, expansion, and continued maintenance of affordable, accessible, barrier-free, reliable, and clean-energy public transportation; and (6) community-wide adoption of 'green' initiatives and activities by organizations, businesses, homes, schools, and government and health care entities.

[Modified: Res. 923, I-19; Modified: Res. 516, A-18; Reaffirmed in lieu of: Res. 504, A-16; Reaffirmed in lieu of Res. 402, A-10; Reaffirmation A-09; CSAPH Rep. 1, I-08]

D-120.929 Permitting the Dispensing of Stock Medications for Post Discharge Patient Use and the Safe Use of Multi-dose Medications for Multiple Patients

Our AMA will: (1) work with national specialty societies, state medical societies and/or other interested parties to advocate for legislative and regulatory language that permits the practice of dispensing stock-item medications to individual patients upon discharge in accordance with labeling and dispensing protocols that help ensure patient safety, minimize duplicated patient costs, and reduce medication waste; and (2) work with the Food and Drug Administration, national specialty societies, state medical societies and/or other interested parties to advocate for legislative and regulatory language that permits the practice of using multi dose medications, such as eye drops, injectables and topical medications in accordance with safe handling and dispensing protocols that help ensure patient safety, minimize duplicated patient costs, and reduce medication waste.

[Res. 234, I-21]

H-135.949 Support of Clean Air and Reduction in Power Plant Emissions

(1) Our AMA supports (a) federal legislation and regulations that meaningfully reduce the following four major power plant emissions: mercury, carbon dioxide, sulfur dioxide and nitrogen oxide; and (b) efforts to limit carbon dioxide emissions through the reduction of the burning of coal in the nation's power generating plants, efforts to improve the efficiency of power plants and continued development, promotion, and widespread implementation of alternative renewable energy sources in lieu of carbon-based fossil fuels. 2. Our AMA will: (a) support the Environmental Protection Agency's proposal, under the Clean Air Act, to regulate air quality for heavy metals and other air toxins emitted from smokestacks. The risk of dispersion through air and soil should be considered, particularly for people living downwind of smokestacks; and (b) urge the EPA to finalize updated mercury, cadmium, and air toxic regulations for

monitoring air quality emitted from power plants and other industrial sources, ensuring that recommendations to protect the public's health are enforceable.

[Appended: Res. 401, A-22; Modified: Res. 908, I-17; Modified: Res. 506, A-15; Reaffirmed: Res. 421, A-14; Reaffirmed in lieu of Res. 526, A-12; Reaffirmation I-07; Res. 429, A-03]

D-135.996 Reducing Sources of Diesel Exhaust

Our AMA will: (1) encourage the US Environmental Protection Agency (EPA) to set and enforce the most stringent feasible standards to control pollutant emissions from both large and small non-road engines including construction equipment, farm equipment, boats and trains; (2) encourage all states to continue to pursue opportunities to reduce diesel exhaust pollution, including reducing harmful emissions from glider trucks and existing diesel engines; (3) call for all trucks traveling within the United States, regardless of country of origin, to be in compliance with the most stringent and current diesel emissions standards promulgated by US EPA; and (4) send a letter to US EPA Administrator opposing the EPA's proposal to roll back the "glider Kit Rule" which would effectively allow the unlimited sale of re-conditioned diesel truck engines that do not meet current EPA new diesel engine emission standards.

[Modified: Res. 521, A-18; Reaffirmation A-14; Reaffirmation A-11; Reaffirmed in lieu of Res. 507, A-09; Res. 428, A-04]

H-135.931 Health Risks of Hydraulic Fracturing

1. Our AMA encourages appropriate agencies and organizations to study the potential human and environmental health risks and impacts of hydraulic fracturing. 2. Our AMA: (A) supports the full disclosure of chemicals placed into the natural environment during the petroleum, oil and natural gas exploration and extraction process; and (B) supports the requirement that government agencies record and monitor the chemicals placed into the natural environment for petroleum oil and natural gas extraction and the chemicals found in flowback fluids, to monitor for human exposures in well water and surface water, and to share this information with physicians and the public. 3. Our AMA supports research on the implementation of buffer zones or well set-backs between oil and gas development sites and residences, schools, hospitals, and religious institutions, to determine the distance necessary to ensure public health and safety.

[Appended: Res. 908, I-17; Appended: Sub. Res. 508, A-15; Res. 405, A-13]

D-480.963 COVID-19 Emergency and Expanded Telemedicine Regulations

Our AMA: (1) will continue to advocate for the widespread adoption of telehealth services in the practice of medicine for physicians and physician-led teams post SARS-COV-2; (2) will advocate that the Federal government, including the Centers for Medicare & Medicaid Services (CMS) and other agencies, state governments and state agencies, and the health insurance industry, adopt clear and uniform laws, rules, regulations, and policies relating to telehealth services that: (a) provide equitable coverage that allows patients to access telehealth services wherever they are located, and (b) provide for the use of accessible devices and technologies, with appropriate privacy and security protections, for connecting physicians and patients; (3) will advocate for equitable access to telehealth services, especially for at-risk and under-resourced patient populations and communities, including but not limited to supporting increased funding and planning for telehealth infrastructure such as broadband and internet-connected devices for both physician practices and patients; and (4) supports the use of telehealth to reduce health disparities and promote access to health care.

[Reaffirmation: A-22; Reaffirmed: Res. 239, A-22; Reaffirmed: CMS Rep. 7, A-21; Alt. Res. 203, I-20]

H-480.936 Telemedicine Services and Health Equity

Our AMA will encourage policymakers to recognize the scope and circumstances for underserved populations including seniors and patients with complex health conditions with the aim to ensure that these patients have the technology-use training needed to maximize the benefits of telehealth and its potential to improve health outcomes.

[Res. 213, A-23]

H-135.923 AMA Advocacy for Environmental Sustainability and Climate

Our AMA (1) supports initiatives to promote environmental sustainability and other efforts to halt global climate change; (2) will incorporate principles of environmental sustainability within its business operations; and (3) supports physicians in adopting programs for environmental sustainability in their practices and help physicians to share these concepts with their patients and with their communities.

[Reaffirmation: I-19; Res. 924, I-16]

D-135.997 Environmental Contributors to Disease and Advocating for Environmental Justice

Our AMA will (1) advocate for the greater public and private funding for research into the environment causes of disease, and urge the National Academy of Sciences to undertake an authoritative analysis of environmental causes of disease; (2) ask the steering committee of the Medicine and Public Health Initiative Coalition to consider environmental contributors to disease and environmental racism as a priority public health issues; (3) encourage federal, state, and local agencies to address and remediate environmental injustice, environmental racism, and all other environmental conditions that are adversely impacting health, especially in marginalized communities; and (4) lobby Congress to support ongoing initiatives that include reproductive health outcomes and development particularly in minority populations in Environmental Protection Agency Environmental Justice policies.

[Modified: Res. 415, A-23; Reaffirmed in lieu of: Res. 505, A-19; Appended: Res. 927, I-11; Res. 402, A-03]

D-440.912 AMA Public Health Strategy

1. Our AMA will distribute evidence-based information on the relationship between climate change and human health through existing platforms and communications channels, identify advocacy and leadership opportunities to elevate the voices of physicians on the public health crisis of climate change, and centralize our AMA's efforts towards environmental justice and an equitable transition to a net-zero carbon society by 2050. 2. Our AMA Board of Trustees will provide an update on loss of coverage and uninsurance rates following the return to regular Medicaid redeterminations and the end of the COVID-19 Public Health Emergency, the ensuing financial and administrative challenges experienced by physicians, physician practices, hospitals, and the healthcare system; and a report of actions taken by the AMA and recommendation for further action to address these issues at I-2023. 3. Our AMA Board of Trustees will provide a strategic plan or outline for the AMA's plan to address and combat the health effects of climate change at I-2023. 4. Our AMA Board of Trustees will provide an update on the efforts and initiatives of the AMA's gun violence task force at I-2023. 5. Our AMA will continue to support increased funding for public health infrastructure and workforce, which should include funding for preventative medicine-related residency programs, to increase public health leadership in this country.

[Modified: BOT Rep. 05, I-23; BOT Rep. 17, A-23]

H-470.953 Evaluating Green Space Initiatives

Our AMA supports appropriate stakeholders in conducting studies to evaluate different green space initiatives that could be implemented in communities to improve patients' health and eliminate health disparities.

[Res. 905, I-15]

H-135.923 AMA Advocacy for Environmental Sustainability and Climate

Our AMA (1) supports initiatives to promote environmental sustainability and other efforts to halt global climate change; (2) will incorporate principles of environmental sustainability within its business operations; and (3) supports physicians in adopting programs for environmental sustainability in their practices and help physicians to share these concepts with their patients and with their communities.

[Reaffirmation: I-19; Res. 924, I-16]

D-135.997 Environmental Contributors to Disease and Advocating for Environmental Justice

Our AMA will (1) advocate for the greater public and private funding for research into the environment causes of disease, and urge the National Academy of Sciences to undertake an authoritative analysis of environmental causes of disease; (2) ask the steering committee of the Medicine and Public Health Initiative Coalition to consider environmental contributors to disease and environmental racism as a priority public health issues; (3) encourage federal, state, and local agencies to address and remediate environmental injustice, environmental racism, and all other environmental conditions that are adversely impacting health, especially in marginalized communities; and (4) lobby Congress to support ongoing initiatives that include reproductive health outcomes and development particularly in minority populations in Environmental Protection Agency Environmental Justice policies.

[Modified: Res. 415, A-23; Reaffirmed in lieu of: Res. 505, A-19; Appended: Res. 927, I-11; Res. 402, A-03]

H-135.973 Stewardship of the Environment

The AMA: (1) encourages physicians to be spokespersons for environmental stewardship, including the discussion of these issues when appropriate with patients; (2) encourages the medical community to cooperate in reducing or recycling waste; (3) encourages physicians and the rest of the medical community to dispose of its medical waste in a safe and properly prescribed manner; (4) supports enhancing the role of physicians and other scientists in environmental education; (5) endorses legislation such as the National Environmental Education Act to increase public understanding of environmental degradation and its prevention; (6) encourages research efforts at ascertaining the physiological and psychological effects of abrupt as well as chronic environmental changes; (7) encourages international exchange of information relating to environmental degradation and the adverse human health effects resulting from environmental degradation; (8) encourages and helps support physicians who participate actively in international planning and development conventions associated with improving the environment; (9) encourages educational programs for worldwide family planning and control of population growth; (10) encourages research and development programs for safer, more effective, and less expensive means of preventing unwanted pregnancy; (11) encourages programs to prevent or reduce the human and environmental health impact from global climate change and environmental degradation. (12) encourages economic development programs for all nations that will be sustainable and yet nondestructive to the environment; (13) encourages physicians and environmental scientists in the United States to continue to incorporate concerns for human health into current environmental research and public policy initiatives; (14) encourages physician educators in medical schools, residency programs, and continuing medical education sessions to devote more attention to environmental health issues; (15) will strengthen its liaison with appropriate environmental health agencies, including the National Institute of Environmental Health Sciences (NIEHS); (16) encourages expanded funding for environmental research by the federal government; and (17) encourages family planning through national and international support.

[Reaffirmation I-16; Reaffirmed in lieu of Res. 402, A-10; Reaffirmed in lieu of Res. 417, A-04; Amended: CSA Rep. 8, A-03; Amended: CLRPD Rep. D, I-92; CSA Rep. G, I-89]

H-135.919 Climate Change Education Across the Medical Education Continuum

Our AMA: (1) supports teaching on climate change in undergraduate, graduate, and continuing medical education such that trainees and practicing physicians acquire a basic knowledge of the science of climate change, can describe the risks that climate change poses to human health, and counsel patients on how to protect themselves from the health risks posed by climate change; (2) will make available a prototype presentation and lecture notes on the intersection of climate change and health for use in undergraduate, graduate, and continuing medical education; and (3) will communicate this policy to the appropriate accrediting organizations such as the Commission on Osteopathic College Accreditation and the Liaison Committee on Medical Education.

[Res. 302, A-19]