

1 Medical Society of the State of New York 2026 HOUSE OF DELEGATES

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3 Report of the Reference Committee on Public Health & Education

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5 Presented by: Linda Clark, MD, MS, Chair

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7 **Doctor Speaker and Members of the House of Delegates:**

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9 **Your Reference Committee recommends the following consent calendar for acceptance:**

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11 **RECOMMENDED FOR ADOPTION**

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1. 2026 Public Health and Education Sunset Review

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14 2. RESOLUTION 156 Support for the World Health Organization Pandemic Agreement

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16 3. RESOLUTION 157 Regulating Convenience Store and Gas Station Dispensaries

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18 4. RESOLUTION 158 Expansion of Drug Checking Test Strips to Include Xylazine Detection

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20 5. RESOLUTION 160 Establishing Competency-Based Postgraduate Training Requirements
21 for Physician Licensure

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23 **RECOMMENDED FOR ADOPTION AS AMENDED**

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6. RESOLUTION 154 Maintaining an Evidence-Based Vaccine Schedule

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26 7. RESOLUTION 155 Strengthening Vaccine Education Across Medical Specialties

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28 8. RESOLUTION 159 Healthcare Policy and Advocacy training for physicians in medical
29 school and residency training

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31 9. RESOLUTION 162 Restoring a Strong Presumption of Release for Pregnant Individuals in
32 ICE Custody

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34 **RECOMMENDED FOR ADOPTION IN LIEU OF**

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10. RESOLUTION 152 Support for Universal Childhood Vaccine Purchasing in New York State,
36 and

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RESOLUTION 153 Universal State Vaccine Program

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39 11. RESOLUTION 163 Clinical Trial for Use of Puberty Blockers in Management of Gender
40 Dysphoria in Children, and

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RESOLUTION 164 Gender Surgery for Children and Adolescents

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43 **RECOMMENDED FOR REFERRAL**

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12. RESOLUTION 150 Ensure that Medical Communications to Patients is Delivered by
45 Electronic Messaging Vendors (Email, SMS, RCS)

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47 **RECOMMENDED FOR NOT-ADOPTION**

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13. RESOLUTION 151 Resolution Supporting the Use of Firearm Suppressors to Prevent
49 Hearing Loss

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51 14. RESOLUTION 161 Limiting Artificial Intelligence in Residency Application Screening

RECOMMENDED FOR ADOPTION

1. 2026 Public Health and Education Sunset Review

THE REFERENCE COMMITTEE RECOMMENDS THAT THE 2026 SUNSET REVIEW REPORT FOR PUBLIC HEALTH AND EDUCATION BE ADOPTED

The reference committee heard no testimony on the sunset report and therefore followed the recommendations submitted by the public health committees that reviewed the sunset eligible resolutions.

2. Resolution 156 Support for the World Health Organization Pandemic Agreement

The original resolution 156 reads as follows:

RESOLVED that the Medical Society of the State of New York support and adopt the following Articles of the World Health Organization Pandemic Agreement as our guiding principles for Pandemic Prevention, Preparedness and Response:

- Article 4, Pandemic prevention and surveillance;
- Article 5, One Health approach for Pandemic Prevention, Preparedness and Response;
- Article 6, Preparedness, readiness and health system resilience;
- Article 7, Health and care workforce;
- Article 8, Regulatory systems strengthening;
- Article 9, Research and development;
- Article 10, Sustainable and geographically diversified local production;
- Article 11, Transfer of technology and cooperation on related know-how for the production of - pandemic-related health products;
- Article 12, Pathogen Access and Benefit-Sharing Systems;
- Article 13, Supply chain and logistics;
- Article 14, Procurement and distribution;
- Article 15, Whole-of-government and whole-of-society approaches;
- Article 16, Communication and public awareness;
- Article 17, International cooperation and support for implementation;
- Article 18, Sustainable financing; and be it further

RESOLVED, that MSSNY forward the above Resolution for adoption at the American Medical Association 2026 Annual Meeting.

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 156 BE ADOPTED

Your Reference Committee heard from the sponsor of this resolution and unanimous testimony in support of this resolution. Your Reference Committee agrees that support of the WHO guiding principles of pandemic preparedness should be adopted by MSSNY.

3. Resolution 157 Regulating Convenience Store and Gas Station Dispensaries

The original resolution 157 reads as follows:

RESOLVED, that the Medical Society of the State of New York (MSSNY) request that state and federal authorities increase their enforcement of restrictions and regulations on over-the-counter hemp derived cannabis substitutes, mushroom derivatives, kratom and other unregulated opioids, and sexual enhancement products; and be it further

RESOLVED, that the Medical Society of the State of New York (MSSNY) explore a partnership with the New York State Department of Health to provide and promote a direct campaign to educate the public on the addictive and harmful nature of over-the-counter hemp derived cannabis substitutes, mushroom derivatives, kratom and other unregulated opioids, and sexual enhancement products.

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 157 BE ADOPTED

Your Reference Committee heard from the sponsor of this resolution and testimony unanimously in support. This resolution aligns with MSSNY general addiction prevention goals.

4. Resolution 158 Expansion of Drug Checking Test Strips to Include Xylazine Detection

The original resolution 158 reads as follows

RESOLVED, that the Medical Society of the State of New York (MSSNY) urge the State of New York to require modification of existing drug-checking test strips so they include xylazine detection as part of the standard testing panel; and be it further

RESOLVED, that MSSNY advocate for Medicaid and state regulated plan coverage of modified test strips that include xylazine detection when dispensed during clinical encounters, and request DOH guidance for clinic workflows, documentation, and privacy to ensure safe and standardized practices.

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 158 BE ADOPTED

Your reference committee heard from the sponsor of this resolution and testimony unanimously in support. This reference committee feels that the uptick in drug-related incidents related to xylazine indicates that these test strips be more widely available and covered by Medicaid and state regulated plan coverage.

5. Resolution 160 Establishing Competency-Based Postgraduate Training Requirements for Physician Licensure

The original resolution 160 reads as follows:

RESOLVED, That the Medical Society of the State of New York (MSSNY) advocate for reform of the New York State Education Department Commissioner's Regulations, specifically Title 8 NYCRR § 60.3, to replace postgraduate training duration requirements based on undergraduate medical school accreditation with a competency-based standard, such that all physicians may be eligible for unrestricted New York State medical licensure after completion of one year of postgraduate training when a residency program director attests that required first-year Accreditation Council for Graduate Medical Education ACGME Milestones or equivalent competency standards have been met.

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 160 BE ADOPTED

Your reference committee heard from the sponsor of this resolution and testimony; largely in support of this resolution. Many speakers marked the difference between medical licensure and practicing. Additional testimony referred to the physician shortage that this resolution would potentially alleviate.

RECOMMENDED FOR ADOPTION AS AMENDED

6. Resolution 154 Maintaining an Evidence-Based Vaccine Schedule

The original resolution 154 reads as follows:

RESOLVED, that the Medical Society of the State of New York (MSSNY) supports the use of the best available scientific evidence, studies, and epidemiological data as the best basis for the United States' individualized vaccination schedule; and be it further

RESOLVED, that the Medical Society of the State of New York (MSSNY) will advocate for and support legislation that will broaden New York law so that required vaccine coverage and guidance are not limited solely to federal recommendations, but also permit state-based guidance grounded in evidence-based vaccination schedules as recommended by nonpartisan medical and public health organizations, including the American Academy of Pediatrics, the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, and the American College of Physicians.

RECOMMENDATION A:

THE REFERENCE COMMITTEE RECOMMENDS THAT THE SECOND RESOLVE OF RESOLUTION 154 BE AMENDED BY INSERTION AND DELETION.

RESOLVED, that the Medical Society of the State of New York (MSSNY) will advocate for and support legislation that will broaden New York law so that required vaccine coverage and guidance are not limited solely to federal recommendations, but also permit state-based guidance grounded in evidence-based vaccination schedules as recommended by nonpartisan national medical and public health organizations, ~~including the American Academy of Pediatrics, the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, and the American College of Physicians.~~

RECOMMENDATION B:

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 154 BE ADOPTED AS AMENDED

Your reference committee heard from the author of this resolution and heard testimony that universally supports the intent of the resolution. Upon further consideration, the members of the reference committee felt that to allay omission of any relevant physician specialty organizations, a broad statement rather than individual mention was the preferable option.

7. Resolution 155 Strengthening Vaccine Education Across Medical Specialties

The original resolution 155 reads as follows:

RESOLVED, that the Medical Society of the State of New York (MSSNY) support and promote comprehensive, evidence-based education on vaccine science, current immunization recommendations, and effective communication about vaccines for all physician specialties, including but not limited to obstetrics/gynecology, internal medicine, surgery, otolaryngology (ENT), psychiatry, urology, family medicine, hematology/oncology emergency medicine, to improve clinician confidence and public health outcomes; and be it further

RESOLVED, that the Medical Society of the State of New York (MSSNY) Council shall charge the Committees on Infectious Disease and Continuing Medical Education to develop and implement enhanced physician education initiatives addressing vaccines effectiveness and vaccine hesitancy , provide a progress report to Council within six months, and present a comprehensive update to the House of Delegates within one year, with this effort designated as a priority for action and implementation; and be it further

RESOLVED, that Medical Society of the State of New York (MSSNY) and American Medical Association (AMA) encourage integration of vaccine education into continuing medical education (CME) offerings and specialty training programs, and advocate at the state and national level for consistent, science-grounded immunization guidance and resources to assist clinicians across all specialties in providing high-quality vaccine counseling and implementation emphasizing clinicians' role in recommending vaccines and addressing vaccine hesitancy among patients.

RECOMMENDATION A:

THE REFERENCE COMMITTEE RECOMMENDS THAT THE FIRST RESOLVE OF RESOLUTION 155 AMENDED BY DELETION.

~~RESOLVED, that the Medical Society of the State of New York (MSSNY) support and promote comprehensive, evidence-based education on vaccine science, current immunization recommendations, and effective communication about vaccines for all physician specialties, including but not limited to obstetrics/gynecology, internal medicine, surgery, otolaryngology (ENT), psychiatry, urology, family medicine, hematology/oncology emergency medicine, to improve clinician confidence and public health outcomes; and be it further~~

RECOMMENDATION B:

THE REFERENCE COMMITTEE RECOMMENDS THAT THE SECOND RESOLVE OF RESOLUTION 155 AMENDED BY INSERTION AND DELETION.

RESOLVED, that the Medical Society of the State of New York (MSSNY) Council shall charge the Committees on Infectious Disease and Continuing Medical Education to develop and implement enhanced physician education initiatives addressing vaccines effectiveness and vaccine ~~hesitancy~~ confidence, provide a progress report to Council within six months, and present a comprehensive update to the House of Delegates within one year, with this effort designated as a priority for action and implementation; and be it further

RECOMMENDATION C:

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 155 BE ADOPTED AS AMENDED

Your reference committee heard from the sponsor of this resolution and testimony universally in support of this resolution. Upon further consideration, this reference committee determined that the word hesitancy has negative connotations and recommends that the word confidence be used instead in relation to vaccines.

8. Resolution 159 Healthcare Policy and Advocacy training for physicians in medical school and residency training

The original resolution 159 reads as follows:

RESOLVED, that The Medical Society of The State of New York (MSSNY) work with policy makers to incorporate healthcare policy and advocacy training into the curricula of medical schools and residency training of young training physicians; and be it further

RESOLVED, that The Medical Society of The State of New York (MSSNY) encourage medical schools and residency programs to provide experiential learning opportunities—such as participation in MSSNY advocacy events, legislative visits, and policy workshops—to prepare future physicians for effective engagement in healthcare policy; and be it further

RESOLVED, that The Medical Society of The State of New York (MSSNY) reaffirm that physicians, as the most humane and patient-centered segment of society should be empowered through education and advocacy training to protect the integrity of the medical profession and the welfare of the patients they serve.

RECOMMENDATION A:

THE REFERENCE COMMITTEE RECOMMENDS THAT THE THIRD RESOLVE OF RESOLUTION 159 AMENDED BY DELETION.

RESOLVED, that The Medical Society of The State of New York (MSSNY) reaffirm that physicians, ~~as the most humane and patient-centered segment of society~~ should be empowered through education and advocacy training to protect the integrity of the medical profession and the welfare of the patients they serve.

RECOMMENDATION B:

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 159 BE ADOPTED AS AMENDED

Your reference committee heard from the sponsor of this resolution and testimony largely in support with cautionary mention of not wanting any new mandates. The reference committee determined that the deleted language is extraneous to the goal of the resolution.

9. Resolution 162 Restoring a Strong Presumption of Release for Pregnant Individuals in ICE Custody

The original resolution 162 reads as follows:

RESOLVED that the Medical Society of the State of New York (MSSNY) supports federal policies and legislation restoring and codifying a strong presumption of release for pregnant individuals in immigration custody, consistent with the protections articulated in Department of Homeland Security Directive 11032.2 (2016) ; and be it further

RESOLVED, that the Medical Society of the State of New York (MSSNY) supports policies and legislation ensuring uninterrupted access to comprehensive, evidence-based prenatal, intrapartum, and postpartum care consistent with community standards of obstetric and practice, and for all pregnant persons in immigration custody, regardless of immigration status; and be it further

RESOLVED, that the Medical Society of the State of New York (MSSNY) urge the American Medical Association (AMA) to adopt policy supporting restoration of a strong presumption of release for pregnant individuals in immigration proceedings, except where detention is strictly required by statute, and to advocate for binding federal standards ensuring uninterrupted access to comprehensive, evidence-based prenatal, intrapartum, and postpartum care for pregnant persons in immigration custody.

RECOMMENDATION A:

THE REFERENCE COMMITTEE RECOMMENDS THAT THE SECOND RESOLVE OF RESOLUTION 162 BE AMENDED BY INSERTION.

RESOLVED, that the Medical Society of the State of New York (MSSNY) supports policies and legislation ensuring uninterrupted access to comprehensive, evidence-based prenatal, intrapartum, and postpartum care consistent with community standards of obstetric and pediatric practice, and for all pregnant persons and their newborns in immigration custody, regardless of immigration status; and be it further

RECOMMENDATION B:

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 162 BE ADOPTED AS AMENDED

Your reference committee heard from the sponsor of this resolution and testimony unanimously in support. Upon further consideration, the reference committee determined that the result of pregnancy is a newborn, therefore the language should include pediatric practice and newborns.

RECOMMENDED FOR ADOPTION IN LIEU OF

10. RESOLUTION 152 SUPPORT FOR UNIVERSAL CHILDHOOD VACCINE PURCHASING IN NEW YORK STATE

AND

RESOLUTION 153 UNIVERSAL STATE VACCINE PROGRAM

The original Resolution 152 reads as follows:

RESOLVED, That the Medical Society of the State of New York (MSSNY) formalize its support for the American Academy of Pediatrics (AAP) recommendations for childhood immunizations, consistent with policies 312.960 (Vaccine Matters) and 312.971 (Preserving Vaccine Policy in the United States), by strengthening its vaccine mandates through new policy and publicly opposing non-evidence-based changes to childhood immunization recommendations at the federal level; and be it further

RESOLVED, That the Medical Society of the State of New York revise policy 312.978 (Immunizations) to strengthen its support for establishing a universal childhood vaccine purchasing program in New York State, in light of recent federal changes to childhood immunization recommendations.

The original Resolution 153 reads as follows:

RESOLVED, That the Medical Society of the State of New York (MSSNY) advocate for the establishment of a statewide universal vaccine purchasing and distribution program, that provides all American Academy of Pediatrics (AAP) and New York Department of Health (DOH) recommended pediatric and adult vaccines to people in New York State (NYS) regardless of insurance status; and be it further

RESOLVED, That the Medical Society of the State of New York (MSSNY) work collaboratively with relevant stakeholders including the New York State Department of Health and specialty societies, to design a program that minimizes administrative burden on any offices that provide primary care and these vaccines, ensure continued adequate provider reimbursement for vaccine administration, and maintains vaccine choice consistent with American Academy of Pediatrics (AAP) and NYS DOH recommendations; and be it further

RESOLVED, That the Medical Society of the State of New York (MSSNY) advocates that all participating sites of this statewide program be required to record all the vaccines given in the New York State Immunization Information System (NYSIIS) to minimize any duplicate delivery of vaccines.

RESOLVED, That the Medical Society of the State of New York revise policy 312.978 (Immunizations) to strengthen its support for establishing a universal childhood vaccine purchasing program in New York State, in light of recent federal changes to childhood immunization recommendations.

RECOMMENDATION A:

THE REFERENCE COMMITTEE RECOMMENDS THAT THE FOLLOWING SUBSTITUTE RESOLUTION BE ADOPTED IN LIEU OF RESOLUTIONS 152 AND 153

RESOLVED, That the Medical Society of the State of New York (MSSNY) advocate for the establishment of a statewide universal vaccine purchasing and distribution program, that provides all American Academy of Pediatrics (AAP) and New York Department of Health (DOH) recommended pediatric and adult vaccines to people in New York State (NYS) regardless of insurance status; and be it further

RESOLVED, That the Medical Society of the State of New York (MSSNY) work collaboratively with relevant stakeholders including the New York State Department of Health and specialty societies, to design a program that minimizes administrative burden on any offices that provide primary care and these vaccines, ensure continued adequate provider reimbursement for vaccine administration, and maintains vaccine choice consistent with American Academy of Pediatrics (AAP) and NYS DOH recommendations; and be it further

RESOLVED, That the Medical Society of the State of New York (MSSNY) advocates that all participating sites of this statewide program be required to record all the vaccines given in the New York State Immunization Information System (NYSIIS)) and to the Citywide Immunization Registry (CIR) to minimize any duplicate delivery of vaccines.

RECOMMENDATION B:

THE REFERENCE COMMITTEE RECOMMENDS A TITLE CHANGE FOR RESOLUTIONS 152 AND 153

UNIVERSAL STATE VACCINE PROGRAM

Your reference committee heard testimony unanimously in support of 152 and 153. Your reference committee learned through testimony that the ability to more easily and efficiently procure vaccines for pediatric and adult patients and consistent reporting will improve patient health and alleviate administrative and financial burden to physicians. Both resolutions had similar goals that supported combining them into a single resolution. Your reference committee recommends this substitute resolution be adopted.

11. RESOLUTION 163 CLINICAL TRIAL FOR USE OF PUBERTY BLOCKERS IN MANAGEMENT OF GENDER DYSPHORIA IN CHILDREN

AND

RESOLUTION 164 GENDER SURGERY FOR CHILDREN AND ADOLESCENTS

The original resolution 163 reads as follows:

RESOLVED, that our Medical Society of the State of New York (MSSNY) call for clinical trials of the use of puberty blockers in minor children in the management of gender dysphoria to determine convincing evidence of their safety and effectiveness.

The original resolution 164 reads as follows:

RESOLVED, that the Medical Society of the State of New York endorse the position statement of the American Society of Plastic Surgeons regarding gender affirming surgery for children and adolescents dated February 3rd, 2026.

RECOMMENDATION A:

THE REFERENCE COMMITTEE RECOMMENDS THAT THE FOLLOWING SUBSTITUTE RESOLUTION BE ADOPTED IN LIEU OF RESOLUTIONS 163 AND 164

RESOLVED, that the Medical Society of the State of New York (MSSNY) affirms that Gender affirming healthcare (GAHC) includes social, medical and surgical GAHC with a shared decision-making process involving the physician, patient and legal guardians, and be it further

RESOLVED, that MSSNY calls for continued research including clinical trials regarding the evidence of the effectiveness of puberty blockers (GnRH analogs) on transgender and non-binary youth, and be it further

RESOLVED that the Medical Society of the State of New York (MSSNY) calls for the restoration of previously allocated federal, state and institutional funding for pediatric gender clinics, puberty blocker research protocols, and supportive mental health services, and be it further

RESOLVED, that the Medical Society of the State of New York (MSSNY) will forward this item to the American Medical Association for consideration and action on a national level.

RECOMMENDATION B:

THE REFERENCE COMMITTEE RECOMMENDS A TITLE CHANGE FOR RESOLUTIONS 163 AND 164

CLINICAL TRIALS AND GENDER DYSPHORIA

Your reference committee heard extensive testimony both in favor and against resolutions 163 and 164. Your reference committee learned through testimony that the submitted amendments to resolution 163 were largely supported. Resolution 164 had disparate testimony that indicates a lack of medical consensus. Your reference committee recommends this substitute resolution be adopted.

RECOMMENDED FOR REFERRAL

12. RESOLUTION 150 Ensure that Medical Communications to Patients is Delivered by Electronic Messaging Vendors (Email, SMS, RCS)

The original Resolution 150 reads as follows:

RESOLVED, the Medical Society of The State of New York (MSSNY) will advocate for the American Medical Association (AMA) to seek federal legislation to prevent communication companies and vendors from censoring physician non-mass electronic and telecommunications communications (emails, Short Message Service (SMS), Rich Communication services (RCS), WhatsApp and others) to patients and vice versa via physician certification programs; and be it further

RESOLVED, the Medical Society of The State of New York (MSSNY) will advocate for the American Medical Association (AMA) to seek federal legislation to ensure that physician non-mass marketing communication to patients via any electronic means including telecommunications (such as emails, Short Message Service (SMS), Rich Communication services (RCS), WhatsApp and others) is given priority deliverability with the goal of 100% deliverability; and be it further

RESOLVED, that the Medical Society of The State of New York (MSSNY) will transmit this resolution to the American Medical Association (AMA) and that the AMA will report on the status of this resolution at the following Annual Meeting

RECOMMENDATION:

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 150 BE REFERRED TO COUNCIL

Your Reference Committee heard from the sponsor of this resolution describing the ever-expanding use of electronic communication services between patients and doctors and the necessity for physicians to not be censored by restrictions in place by certain communication providers. Your reference committee feels that this resolution merits more study as to the best approaches to achieve the proposed goals of this resolution and to determine if the intent of this resolution is within the scope of The Medical Society of the State of New York.

RECOMMENDED FOR NOT-ADOPTION

13. Resolution 151 Resolution Supporting the Use of Firearm Suppressors to Prevent Hearing Loss

The original Resolution 151 reads as follows:

RESOLVED, That the Medical Society of the State of New York (MSSNY) endorses the use of firearm suppressors for hearing preservation, and be it further

RESOLVED, That the Medical Society of the state of New York (MSSNY) supports legislation decriminalizing the possession and use of firearm suppressors for hearing preservation.

RECOMMENDATION:

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 151 NOT BE ADOPTED

Your reference committee heard from the author of this resolution at the reference committee meeting. There was submission of an amendment to this resolution, and testimony primarily in opposition to this resolution with only one person in support of further study. This reference committee recommends not adopt, as of firearm suppressors is currently a felony in New York State. This committee appreciates the need for personal protective equipment, but the testimony in favor of this resolution was not strong enough to recommend firearm suppressors as the best means by which to mitigate hearing loss in gun users.

14. Resolution 161 Limiting Artificial Intelligence in Residency Application Screening

The original resolution 161 reads as follows:

RESOLVED, that the Medical Society of the State of New York (MSSNY) supports the limited use of Artificial Intelligence (AI) to numerical data interpretation as a means for evaluating residency applications; and be it further

RESOLVED, that the Medical Society of the State of New York (MSSNY) advocate for transparency in Artificial Intelligence AI-assisted screening processes to ensure fairness and maintain human oversight in residency application evaluations.

RECOMMENDATION:

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 161 NOT BE ADOPTED

Your reference committee heard testimony from the author of this resolution. While the author's testimony was compelling, it did not reflect the resolved clauses herein. This reference committee recommends that this resolution not be adopted as it is beyond the scope of MSSNY.