

REPORT OF THE COUNCIL ON ETHICAL AND JUDICIAL AFFAIRS*

CEJA Report 01-A-25

Subject: The AMA *Code of Medical Ethics* Evolving to Provide Health Care Systems Ethics Guidance

Presented by: Jeremy A. Lazarus, MD, Chair

Referred to: Reference Committee on Ethics and Bylaws

BACKGROUND

In 1847, the AMA established the world's first national code of ethics for physicians [1-2]. Stewarded by the Council on Ethical and Judicial Affairs (and its predecessors), the AMA *Code of Medical Ethics* is continually updated to help physicians meet their ethical obligations to patients in an ever changing scientific and practice environment [3]. As a living document, the *Code* has gone through major updates. In 1957, a major revision of the *Code* distinguished medical etiquette from medical ethics. In 1980, the *Code* was updated to address the tension between ethical standards and legal requirements [4]. More recently, the *Code* modernization project, completed in 2016, worked to ensure that Ethical Opinions in the *Code* were internally consistent, used modern terminology, and provided sound ethical guidance to physicians [5].

While the *Code* remains focused on the ethical duties of physicians, today's practitioners interact with many health care-related organizations, whether they be hospitals, insurers, or pharmaceutical companies. One major structural change in the practice environment is that most physicians are no longer self-employed (or their own bosses) and are now employees of hospitals, group practices, or other corporate entities. For example, the trend towards employed physicians accelerated within recent years, and the number of physicians in private practices dropped below 50 percent for the first time in 2020 [6]. Consequently, the decisions that physicians make in service to their patients are increasingly shaped, influenced, and sometimes dictated by organizational actors.

ETHICAL ISSUE

When organizational actors shape, influence, or dictate decisions that physicians make in service to their patients, it can create moral tension and ethical conflict between physicians and the health care organizations with whom they are interacting. For the *Code* to serve its purpose in this rapidly changing practice environment, its ethics opinions should speak to how health care organizations can support physicians in meeting their ethical obligations to patients, or what will be referred to as "health system ethics" for the remainder of this report.

Up to now, the *Code* has addressed health system ethics indirectly by speaking to the ethical responsibilities of physicians in organizational leadership positions and a case-by-case basis such as in Opinion [11.2.7, Responsibilities to Promote Equitable Care](#). Therefore, the issue is whether

* Reports of the Council on Ethical and Judicial Affairs are assigned to the Reference Committee on Ethics and Bylaws. They may be adopted, not adopted, or referred. A report may not be amended, except to clarify the meaning of the report and only with the concurrence of the Council.

the *Code* should again evolve so that its opinions also provide ethics guidance to health care organizations regarding how they can support physicians in upholding their ethical obligations to patients.

ETHICAL ANALYSIS

The purpose of the *Code* addressing health systems ethics is to provide guidance regarding actions health care organizations ought to take to create environments that will support and enable physicians to abide by and uphold their individual ethical obligations and duties. As this is a new way of approaching the development of ethics opinions within the *Code*, the Council on Ethical and Judicial Affairs sought feedback from various stakeholders as follows:

- CEJA Open Forum at I-23 entitled “Should the AMA *Code* Speak to Health Care Systems.” Invited panelists included Drs. Michael Suk, Jessie Ehrenfeld, and Michael Tutty of our AMA leadership.
- A virtual meeting in October of 2024, with physician leadership from key AMA Sections and Councils. Attendees included Dr. Nancy Church from the Organized Medical Staff Section, Dr. Stephen Parodi from the Integrated Physician Practices Section, and Drs. Betty Chu and Steve Epstein from the Council on Medical Service.
- CEJA Open Forum at I-24 entitled “Evolving the AMA *Code* to Speak to Health Care Organizations.” Invited panelists included Dr. Christopher DeRienzo, Chief Physician Executive, at the American Hospital Association and Julie Wagner, Head of Global Ethics, Compliance, and Enforcement Legal Policy, at the Pharmaceutical Research and Manufacturers of America.

During these above engagements, there was broad support expressed for the *Code* to address health system ethics. The ethics logic for moving toward providing health system ethics guidance is premised on the understanding that when health care organizations are acting ethically, physicians are better able to provide high quality patient care. Additionally, when any party to patient care fails to act ethically, patients’ trust in the medical profession and of health care organizations can be undermined, contributing to greater moral distress and burnout among physicians, as well as damaged organizational reputation and market position for health care organizations.

RECOMMENDATION

In the light of the above, the Council on Ethical and Judicial Affairs recommends that the following be adopted and the remainder of the report be filed:

That our AMA supports the continued evolution of the *Code of Medical Ethics* in addressing how health care organizations and physicians can work together in meeting their mutual obligations to serve patients and the public.

Fiscal Note: Less than \$500

REFERENCES

1. Ethics. American Medical Association. February 21, 2025. Accessed February 21, 2025. <https://www.ama-assn.org/delivering-care/ethics>
2. Code of Medical Ethics. *AMA Code of Medical Ethics*. Accessed February 21, 2025. <https://code-medical-ethics.ama-assn.org/>.
3. American Medical Association. History of the Code. 2017.
4. Brotherton S, Kao A, Crigger BJ. Professing the Values of Medicine: The Modernized AMA Code of Medical Ethics. *JAMA*. 2016;316(10):1041. doi:10.1001/jama.2016.9752
5. Kane CK. Policy Research Perspectives. American Medical Association. Published online 2023.
6. AMA analysis shows most physicians work outside of private practice. American Medical Association. May 5, 2021. Accessed February 26, 2025. <https://www.ama-assn.org/press-center/press-releases/ama-analysis-shows-most-physicians-work-outside-private-practice>.