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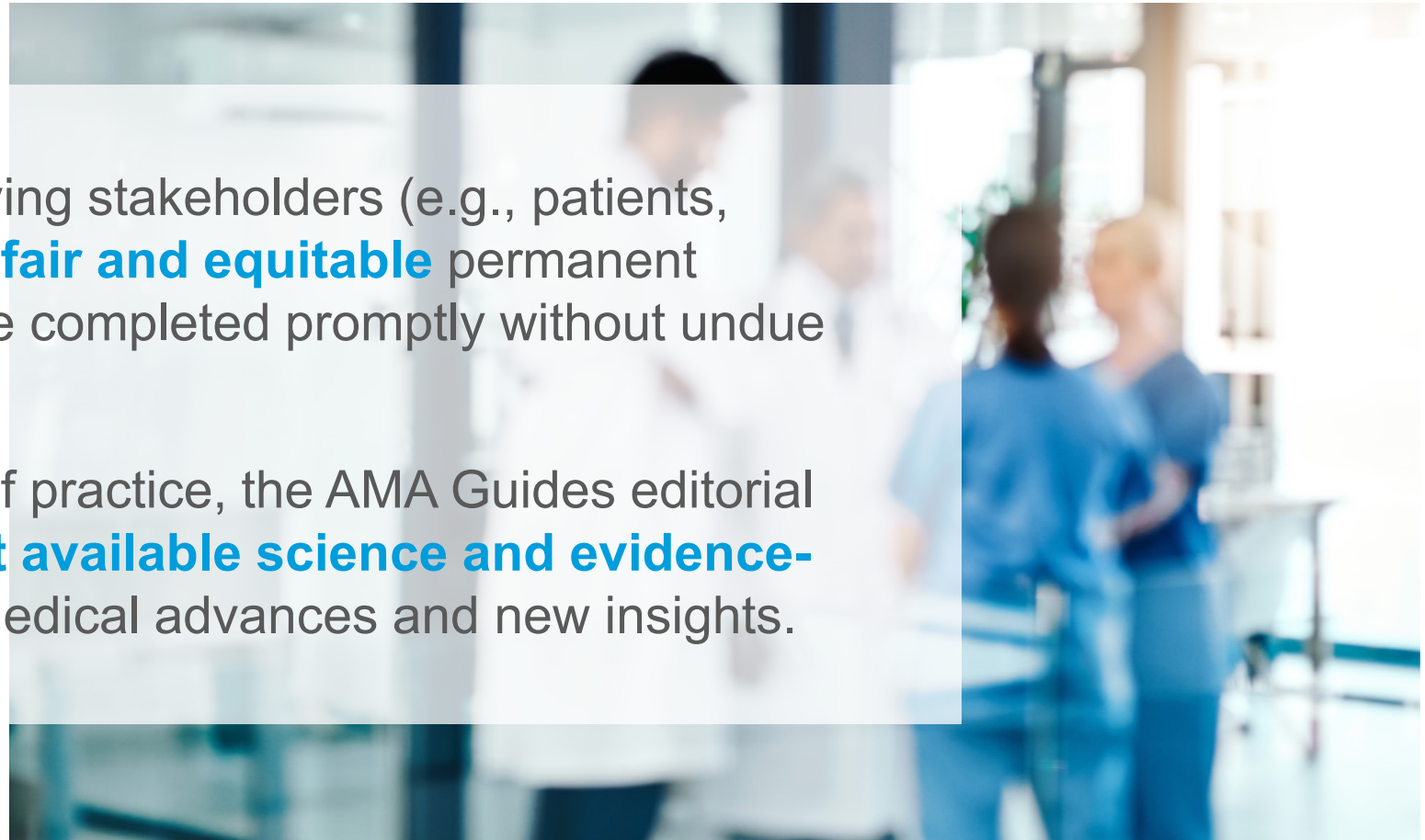
# **AMA Guides®** **Editorial Submission Process**

**Updated: July 2021**

# AMA Guides Program Mission

The AMA is committed to serving stakeholders (e.g., patients, physicians, government) with **fair and equitable** permanent impairment ratings that can be completed promptly without undue administrative burden.

By engaging the community of practice, the AMA Guides editorial process incorporates the **best available science and evidence-based medicine**, reflecting medical advances and new insights.

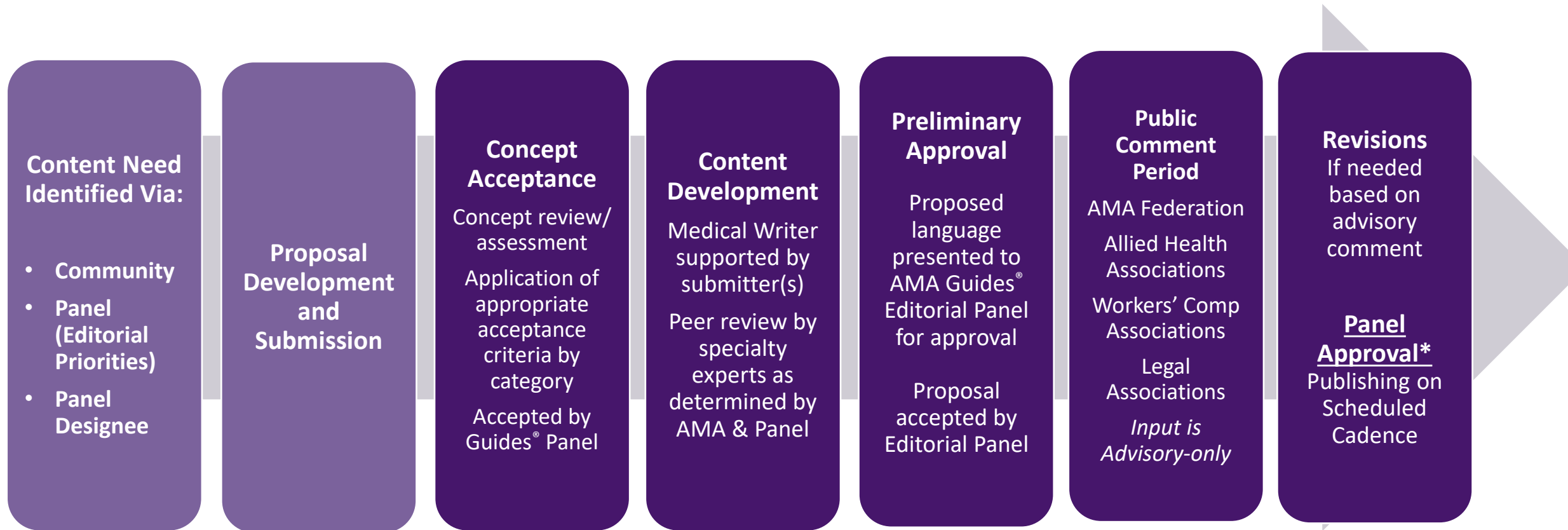


# Editorial Panel Mission and Scope

Oversees the delivery of timely enhancements to the AMA Guides to incorporate the most current evidence-based and consensus-based medicine.

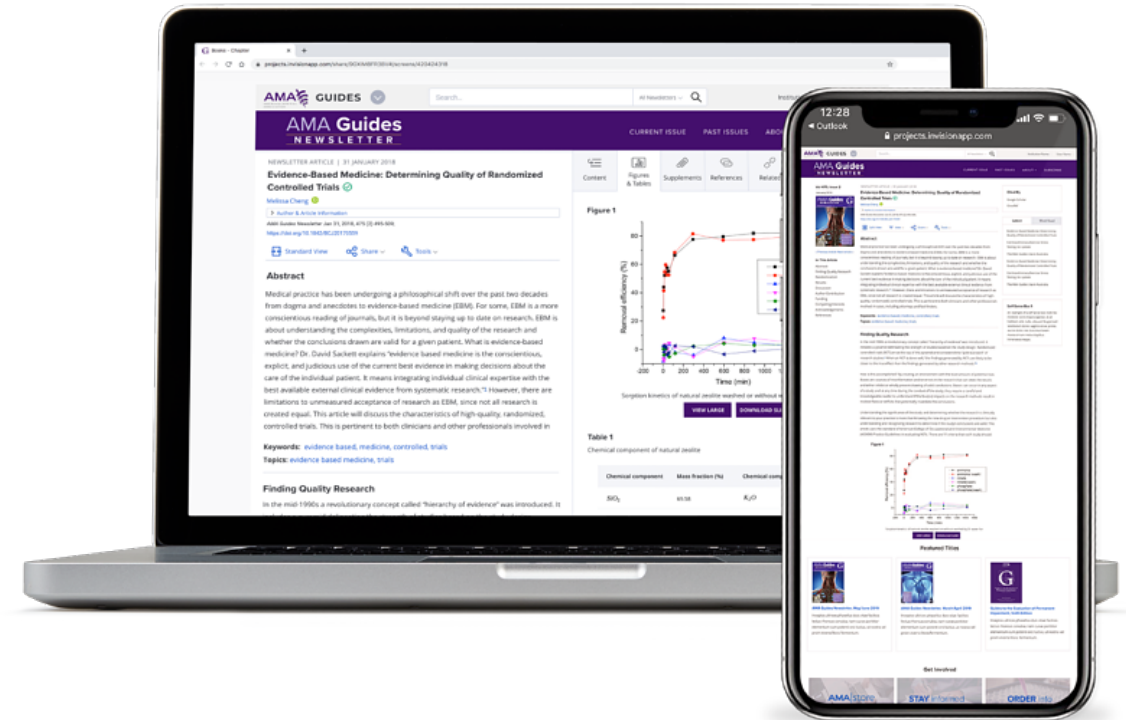
- Rapid incorporation of new medical advances
- Utilize the most current protocols to provide fair and consistent evaluations
- Focus editorial priorities on areas where additional guidance is most needed
- Publish content on a consistent cadence that recognizes state regulatory considerations, not to exceed annual updates

# Editorial Review Process



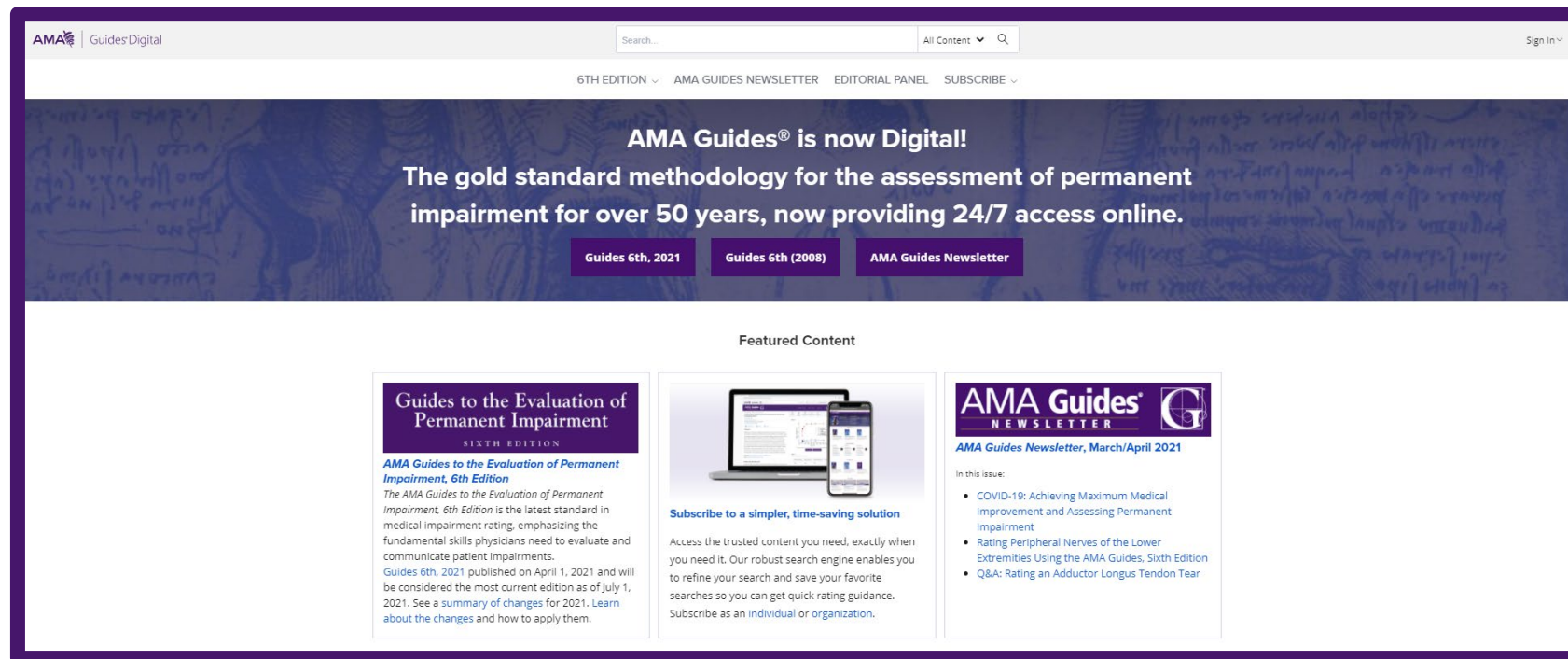
# Establishing a Consistent Nomenclature

- **AMA Guides Digital:** Refers to the overall concept of AMA Guides online.
- **AMA Guides 6th:** This reflects the content of the 6<sup>th</sup> Edition. The AMA Guides 6th Edition, will be the first content set offered via AMA Guides Digital.
- **AMA Guides 6th 2021 (2022, etc):** This reflects the content of the 6th Edition with Panel-approved content updates. Content will be updated annually, offered via AMA Guides Digital.



# AMA Guides Digital

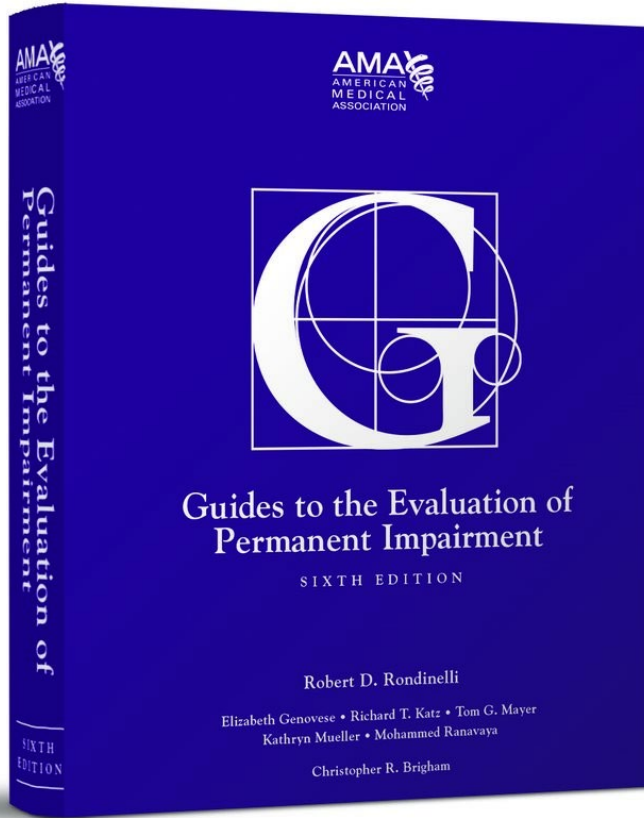
Updates to the AMA Guides will be available exclusively on AMA Guides Digital.



AMAGuidesDigital.com



# Sixth Edition of the AMA Guides Used as Baseline for Updates



- The AMA Guides Sixth Edition (2008) is considered the foundation for proposed updates to the AMA Guides, and future updates to the AMA Guides will build upon the changes that precede them (eg, AMA Guides Sixth 2022 will build on AMA Guides Sixth 2021).
- Previous editions (3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup>) will **not** be impacted by content updates approved by the Editorial Panel

# Open, Transparent Editorial Process

- The AMA in tandem with the broader stakeholder community will develop resources that reflect advances in medicine and address the challenges states and jurisdictions face in appropriately evaluating permanent impairment, a critical input to the determination of benefits in workers compensation and personal injury settlements. It is recognized that compensation is not medicine and compensatory decisions must reside elsewhere.
- AMA Guides are refined using an open editorial process that invites broad input from the health care community and beyond. This stakeholder-driven process is publicly overseen by the Editorial Panel.
- Individuals and organizations are encouraged to submit editorial change proposals to update the AMA Guides and participate in Public Meetings and Comment Periods to have their voices heard on the latest changes to the AMA Guides.
- The Editorial Panel reviews and approves timely enhancements to the AMA Guides reflecting current evidence-based medicine.
- The open editorial process will draw on the AMA's unique convening capability to gain insights from the entire health care community.



# Annual Update Cadence

- The AMA Guides will be updated once a year to reflect advancements in medicine.
- Any updates to the AMA Guides will occur only after careful consideration by the AMA Guides Editorial Panel.
- We simultaneously recognize the need for stability and consistency in state workers compensation systems as well as physician practices. In light of these complementary needs, AMA Guides will be updated on an annual basis, and any updates will be immediately communicated.
- The AMA will provide the most current medicine and states must adopt processes that are pragmatic.

# Content delivery activity timeline: 2021 & 2022

*\*Effective dates for new AMA Guides Sixth content*

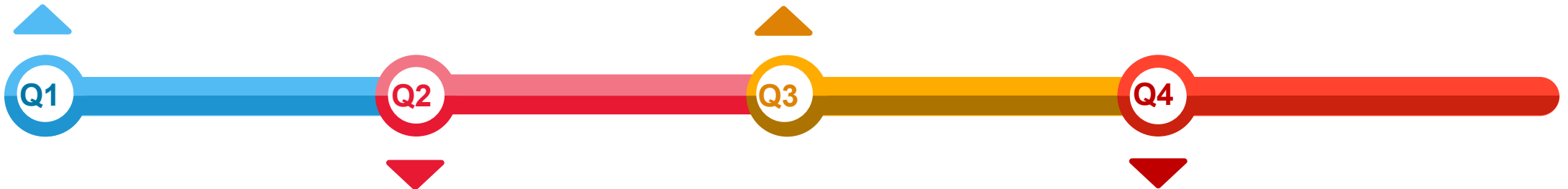
## Launch of AMA Guides Digital

Panel Adoption of 2021 Content  
Communications to State  
Societies and Regulators  
Education Modules Available

**April 1:** New content available for states that mandate use of the Sixth Edition

**July 1:** New content effective for states that mandate use of the Sixth Edition\*

AMA Guides Sixth 2021



Proposal Development

**April – June:** Proposals presented for Editorial Panel Consideration.

**July:** Panel Approval

**Oct 1:** New content available for states that mandate use of the Sixth Edition  
*Education Modules Available*

AMA Guides Sixth 2022 and beyond

**August:** Public Comment Period

**Jan 1, 2022:** (following year)  
New content effective for states that mandate use of the Sixth Edition\*

# AMA Ed Hub™

AMA Guides 6th 2021: Why Mental and Behavioral Health Updates are Important

0% COMPLETE

Lesson 2 - History of the AMA Guides

Lesson 3 of 12

## What is Changing in AMA Guides Sixth 2021 and Why?

Achieving accurate, equitable and consistent impairment ratings means that methodology should change when medical advances change long term patient outcomes.

▼ LEARN

- Introduction
- History of the AMA Guides
- What is Changing in AMA Guides Sixth 2021 and Why?
- What has Changed with DSM-IV to DSM-5 Terminology and ...
- How Have Impairment Ratings Changed?

# How to Submit an Update

## AMA Guides Proposal Submission Portal

Visit <https://guidesapp.ama-assn.org/GUIDES/> to begin an application.

AMA username and password required for use of the portal.

The screenshot displays the AMA Guides Proposal Submission Portal. At the top, a navigation bar includes links for 'AMA | Membership | JAMA Network | AMA Store | FREIDA', a 'Guides Panel' button, and a 'Your Account' dropdown menu. The AMA logo is prominently displayed on the left. Below the navigation bar, a secondary bar contains links for 'Home', 'Profile', 'Editorial Panel Portal', and 'Archive'. The main content area is divided into two columns. The left column features a purple box titled 'Submit a New AMA Guides® Content Proposal', which contains text about the AMA's commitment to stakeholders and the editorial process, along with 'How does it work?' and 'Apply Now' buttons. The right column has a grey box titled 'Announcements' with a welcome message and important dates for the 2023 proposal cycle. At the bottom, a grey box titled 'Applications' shows a search bar and a table with columns for ID, Proposal Title, Supporting Organization, Type, Date Created, and Status. The table currently displays the message 'You do not have any applications.'

# General Criteria

All editorial change proposals must satisfy each of the following criteria:

- The proposed editorial change is carefully drafted and conforms to the prevailing style of the *AMA Guides*;
- The terminology and the analytical frameworks used in the proposal are consistent with the World Health Organization's International Classification of Functioning, Disability, and Health (ICF);
- The structure and content of the proposed editorial change ensures that impairment ratings are transparent, clearly stated, and reproducible, to insure physician interrater reliability;
- The clinical soundness of the proposed editorial change is demonstrated with the best available evidence (next slide) except in the case of minor editorial changes.

# Evidentiary Requirements

- A proposal for an editorial change must be supported by an evidence-based foundation when possible. When evidence-based medicine is not available, consensus-based medicine developed in a structured Delphi approach may be substituted.
- In order of preference, one of the following is required to support each proposed editorial change.
  1. Evidence-based medicine documented in peer reviewed articles published in medical journals indexed in PubMed, Web of Science, SCOPUS, or Google Scholar that are classified as Level of Evidence I-IV in the Oxford Centre for Evidence Based Medicine Level of Evidence Table (Appendix A); or
  2. Outcomes-based Real-World Evidence (RWE), meaning observational data generated during routine clinical practice and stored in EHRs, medical claims or billing databases, and registries with evidence determined to be of High or Moderate quality using the WHO's GRADE (Grading of Recommendations, Assessment, Development, and Evaluation) framework (Appendix B); or
  3. Other peer-reviewed sources such as specialty society guidelines developed in accordance with the Institute of Medicine standards; or
  4. Consensus-based decisions developed in a Delphi process endorsed or overseen by a relevant stakeholder professional association or society. In some cases, evidence may take the form of data or case law that demonstrates inconsistent application of the AMA Guides or a need for clarification of some element. In these cases, evidence of the need to enhance the AMA Guides may include judicial outcomes such as:
    - a) State-based workers' compensation impairment rating data that is categorized by CPT code or injury code;
    - b) Industrial Commissioner (or similar) data on litigated case outcomes when impairment ratings are an issue;
    - c) Judicial opinions or law journal articles that identify a specific issue of wide and inconsistent impairment ratings for similar conditions.

While this evidence may demonstrate a need for change, it does not necessarily reflect what change is required (i.e., the medicine). In these cases, the AMA Guides Editorial Panel may elect to provide more precise guidance, or may determine that it is necessary to engage a specialty society or other expert advisors to propose specific editorial changes.



# Submission Timeframe and Presentation

- There is a requirement that AMA Staff review all applications before they are advanced to the Editorial Panel for consideration. AMA staff reserves the right to postpone applications that are not ready for Panel Review.
- Applicants are encouraged to check the AMA Guides website for more information on submission deadlines.
- A short presentation of proposals may be requested from applicants, but this is not a requirement.

# AMA Statement on Lobbying

Applicants and other interested parties must not engage in “lobbying” for or against Guides proposals. “Lobbying” means unsolicited communications of any kind made at any time (including during Editorial Panel meetings) for the purpose of attempting to improperly influence voting by members of the Editorial Panel on a proposal. Any communication that can reasonably be interpreted as coercion, intimidation or harassment is strictly prohibited. Violation of the prohibition on lobbying may result in sanctions, such as being suspended or barred from further participation in the Guides process.

# Questions?

- Contact [guidesproposals@ama-assn.org](mailto:guidesproposals@ama-assn.org)



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