



AMA ADVOCACY 2024 EFFORTS

UPDATED JUNE 2024

There are far too many everyday practice challenges interfering with patient care. That's why the American Medical Association is advocating to keep physicians at the head of the health care team, reform the Medicare physician payment system, relieve the burdens of overused prior authorizations and so much more.

THIS IS HOW WE FIGHT.



Fixing prior authorization

- Secured a CMS final rule that requires government-regulated health plans to reduce the timeframes for prior authorization decisions and to publicly report program metrics. These plans will also be required to offer electronic prior authorization technology that directly integrates with EHRs. These changes build on new Medicare Advantage requirements that went into effect in January 2024 that ensure validity of prior authorization clinical criteria and protections for care continuity.
- Secured reintroduction of H.R. 4968, the GOLD CARD Act of 2023, which permits physicians with a strong record of complying with prior authorization requirements to be exempt from this utilization management technique in Medicare Advantage.
- Working in partnership with state medical associations across the country to enact prior authorization reform using AMA model legislation, data, testimony and other resources. Ten new state laws have been enacted in the last year and the AMA is supporting more than a dozen bills currently in state legislatures.
- Facilitated United Healthcare and Cigna reducing the volume of their prior authorization requirements by 20% and 25%, respectively.

95% OF PHYSICIANS REPORT THAT PRIOR AUTHORIZATION SOMEWHAT OR SIGNIFICANTLY INCREASES PHYSICIAN BURNOUT.*

Reducing physician burnout

- Working closely with the Federation of State Medical Boards and the Dr. Lorna Breen Heroes' Foundation to urge state medical boards, credentialing bodies, and others to remove from their applications stigmatizing and potentially discriminatory questions that may deter physicians from seeking care—multiple boards and health systems have changed their applications after consultations with the AMA.
- AMA efforts with partners have led to statewide changes in Massachusetts and Virginia, as well as changes in more than 26 states, multiple national, regional, and state hospitals and health systems and urgent care centers, and other facilities—having a positive impact on hundreds of thousands of physicians.
- Advocated for and supported new laws and policies in over a dozen states that protect physicians who seek care for wellness and burnout.
- Working to implement and reauthorize the Dr. Lorna Breen Health Care Provider Protection Act via the Dr. Lorna Breen Health Care Provider Protection Reauthorization Act (H.R. 7153/S. 3679). H.R. 7153 passed the House Energy and Commerce Committee in March 2024.
- Supporting state physician health programs to help ensure that physicians seeking care have important confidentiality protections to support their treatment and safe return to practice. Working with the Federation of State Physician Health Programs to further support and destigmatize participation in physician health programs.



Reforming Medicare payment

- Achieved consensus across medicine to pursue four pillars of Medicare payment reform:
 - Establish an annual inflation-based payment update for Medicare physician payments
 - Revise policies and processes used to adjust payments to maintain budget neutrality
 - Simplify and improve the clinical relevancy reporting programs under the Merit-based Incentive Payment System
 - Extend policies that support practices wanting to transition to value-based payment systems
- Secured introduction of H.R. 2474 to apply an automatic inflation update to Medicare physician payments by tying the Medicare physician fee schedule to the Medicare Economic Index. H.R. 2474 currently has more than 130 bipartisan House cosponsors.
- Secured introduction of H.R. 6371 to revise budget neutrality policies to mitigate inappropriate payment schedule conversion factor cuts and minimize revenue instability. H.R. 6545, bipartisan legislation that includes key components of H.R. 6371 to reform budget neutrality requirements, passed out of the House Energy and Commerce Committee.

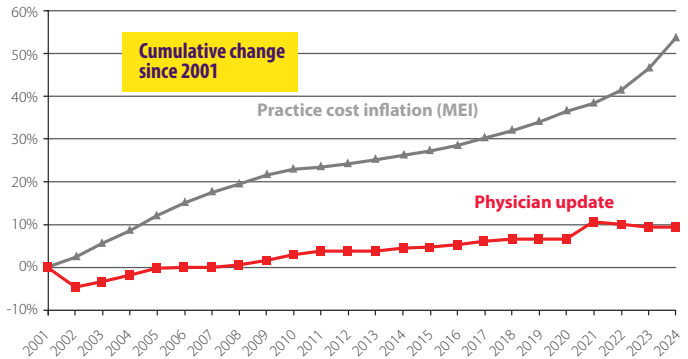


- Secured introduction of H.R. 5013/S. 3503, the Value in Health Care Act, which, among other things, extends the incentive payments for advanced alternative payment models.
- Launched a grassroots campaign and website, [FixMedicareNow.org](https://www.fixmedicarenow.org), last June that to date has had 312k+ contacts to Congress.

Medicare physician payments (when adjusted for practice cost inflation) have declined 29% from 2001 to 2024.*

Note: Updates from the Consolidated Appropriations Act of 2024 have been incorporated.

Updated March 2024



Take action to
[#FixMedicareNow](https://www.fixmedicarenow.org)

* Source: Federal Register, Medicare Trustees' Reports, Bureau of Labor Statistics, Congressional Budget Office

Advocating for solutions to cybersecurity issues

- Continuing to advocate at all levels of government and across the payer community to find workable solutions to the Change Healthcare cyberattack that allow practices to maintain financial stability while providing timely care.
- Conducted multiple surveys to assess the serious impact the Change Healthcare cyberattack is having on physician practices and used this information to press for the below accommodations from all stakeholders:
 - Advance payments
 - Restoring practices' electronic systems
 - Suspension of all prior authorization, quality reporting and similar administrative requirements
 - Broader focus on restoring function for independent physician practices
 - Prohibiting retroactive denials based on eligibility or lack of utilization management approval
 - Waivers for timely filing deadlines for claims and appeals
 - More information on the scope and the impact on patients' data
- Submitted multiple statements for the record for Congressional hearings on the Change Healthcare cyberattack.
- Urging Congress and the administration to:
 - Consider long-term policy changes and protections needed to both deter future cyberattacks and protect physicians if/when they happen again
 - Ensure physicians' financial security so they have resources to weather a cybersecurity crisis
 - Hold critical service providers, like clearinghouses, accountable and to require disaster recovery and business continuity planning

Promoting physician-led care

- Helped defeat legislation across the country that would have allowed:
 - Physician assistants to practice independently without physician oversight
 - Pharmacists to diagnose and treat patients, as well as prescribe medications
 - Optometrists to perform surgery
 - Naturopaths to prescribe legend drugs
 - Scope of practice expansion for nurse practitioners and other APRNs
- Worked with multiple state medical associations to introduce new or strengthen existing Truth in Advertising laws.
- Continuing to actively oppose the VA Federal Supremacy Project to ensure that veterans are provided with the care they deserve, care from a physician-led team.
- Continue to actively oppose federal bills that seek to expand the scope of practice for pharmacists, psychologists, nurse practitioners, physician assistants, and nurse anesthetists in Medicare or other federal health care programs.
- Leading AMA Scope of Practice Partnership, which has provided more than \$4.0 million in grants since its inception to support state medical association and specialty society efforts. Ten grants have been awarded in 2024.

**WORKING WITH MEDICAL ASSOCIATIONS TO OPPOSE
INAPPROPRIATE SCOPE EXPANSIONS IN 30+ STATES SO FAR IN 2024.**

Making technology work for physicians

- Achieved passage of legislation to extend Medicare telehealth coverage, including audio-only and hospital-at-home services, through 2024. Legislation recently passed the House Ways and Means Committee to expand coverage of these services through 2026.
- Supporting H.R. 4198/S. 2016, the CONNECT for Health Act, and H.R. 7623/S. 3967, the Telehealth Modernization Act, two bipartisan pieces of legislation which would expand coverage of telehealth services through Medicare and make permanent COVID-19 telehealth flexibilities.
- Ensuring AI is developed, tested and implemented in a way that meets the needs of physicians and patients.
- Requiring EHRs to make complete and up-to-date AI information transparent.

Pursuing solutions to the physician workforce crisis

- Pushing Congress to help stop the current and growing crisis in the physician workforce by emphasizing a multi-prong solution to establish:
 - Additional GME slots and funding so more physicians can be trained
 - › H.R. 2389, the Resident Physician Shortage Reduction Act, currently has more than 170 bipartisan House cosponsors.
 - Additional funding in support of programs created through the Dr. Lorna Breen Health Care Provider Protection Act
 - More loan repayment and scholarship programs for physicians, such as through the National Health Service Corps
 - Greater access to international medical graduates through expansion of the Conrad 30 program (H.R. 4922/S. 665) and reclaiming unused employment-based visas from the past 30 years (H.R. 6205/S. S. 3211)

THERE IS A PROJECTED SHORTAGE OF BETWEEN 13,500 AND 86,000 PHYSICIANS BY 2036.*

Fighting government interference in evidence-based medicine

- Working with state and federal policymakers to preserve access to the full spectrum of reproductive health care, including access to mifepristone and other evidence-based treatments.
- Successfully pushed states to adopt legal protections for physicians who provide abortion care to patients seeking care outside their home state.
- Fighting back against state legislative efforts to ban gender-affirming care for transgender patients.

Improving public health

- Pushing lawmakers to adopt common-sense steps to prevent avoidable deaths and injuries caused by firearms and working with a coalition on ensuring the continuation of and increase in the funding for firearm violence prevention research.
- Successfully advocated for over-the-counter availability of oral contraceptives.
- Advocating for state-level bans on flavored tobacco and vaping products.

* Source: *The Complexities of Physician Supply and Demand: Projections From 2021 to 2036*, Association of American Medical Colleges.
<https://www.aamc.org/media/75236/download>

Addressing insurer issues

- Continuing to address No Surprises Act implementation issues with the administration, Congress and in the courts when necessary. Recent court decisions, supported by the AMA, have resulted in a fairer dispute resolution process.
- Led over 100 other organizations in preventing implementation of burdensome Cigna modifier 25 policy.
- Supported bipartisan legislation to hold health plans responsible for inaccurate provider directories under Medicare Advantage.

Reducing overdose and improving care for patients with pain

- Successfully advocated for over-the-counter availability of naloxone and continuing to advocate for pharmacies and other retailers to place naloxone in prominent locations. Continuing to urge all manufacturers to make naloxone and other overdose reversal medications OTC and for health insurance coverage of these life-saving medications.
- Successfully advocated for revisions to the CDC's opioid prescribing guidelines that resulted in the CDC removing its numeric thresholds for dose and quantity and making clear that state laws and payer policies should not include specific, numeric thresholds for treating patients with pain. Working with multiple states on legislation to reverse harmful policies based on the old CDC guidelines.
- Continuing to work with states to implement policies that support access to medications for opioid use disorder, including for people who are pregnant, post-partum or incarcerated.

Improving maternal health outcomes

- Released a new set of concrete steps that the Administration and Congress can take to improve maternal health outcomes in the United States. The AMA is having discussions with the administration to advance our recommendations, particularly in the postpartum period.
- Established a specialty society working group to align and amplify our maternal health advocacy work.
- Working with policymakers to permanently extend Medicaid and Children's Health Insurance Program (CHIP) coverage to 12 months postpartum.
- Shared recommendations with the administration to ensure that the new Transforming Maternal Health program significantly improves birthing outcomes for pregnant and postpartum individuals and their babies.
- Developed a document detailing AMA-led community initiatives, state and federal advocacy efforts, and other national campaigns that the AMA is engaging in to impact maternal health outcomes.



**Find out ways to
get involved in
AMA advocacy.**