Doctors have unearthed the root of new payment model challenges

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One of my favorite things about being involved in organized medicine is the frequent opportunities I get to talk to physicians across the country. I remain amazed at how different we physicians may be in location, specialty and background, but how similar we are in our challenges, successes and experiences.

The root of our challenges

Here’s something I hear frequently: Physicians are being flooded with data but are not provided the right tools to decipher and apply it for improved patient health outcomes. Most doctors want to make new payment and delivery methods work. We’re not obstructionist dinosaurs. We want to succeed for our patients. But we need the appropriate resources to help redesign the health care system.

That’s really the driving focus of the AMA’s recent study with the RAND Corporation, released last month. The study investigated physician experiences with the adoption of health care delivery and payment reforms. This investigation is especially important at a time when the government, private insurers and others are upping the ante for changing the ways physicians are paid, in theory, to create stronger incentives for efficient, high-quality care.

At a panel the AMA convened last month in Washington, D.C., folks from across the health care system—a private insurance company, a large hospital system and a small private practice—shared their diverse experiences and came to the same conclusion: When physicians have data in a meaningful context and tools to act on it, they respond positively, and patient care improves.

How we’re securing better data and tools

This is part of the reason the AMA will have such a presence at this year’s Healthcare Information and Management Systems Society (HIMSS) 2015 Annual Conference, taking place next week. We’ll
be able to connect with some of the top minds in health IT to ensure physicians are in on the ground floor of innovation. (In fact, there’s still time to share your thoughts on the good and the bad in using technology in health care by tweeting at our president Robert M. Wah, MD, who is a keynote speaker at the conference.)

It also is part of the reason we have worked so hard to eliminate the Medicare sustainable growth rate formula that hinders physician practices from adopting new practice models. I’m cautiously optimistic that, after much effort, we are very close to success in this area.

Finally, and perhaps most importantly, it is part of the reason we are dedicating so many resources to the AMA’s Professional Satisfaction and Practice Sustainability initiative. Through this effort, we’re helping physicians successfully navigate the health care environment in sustainable practices.

Physicians’ professionalism shouldn’t be taken for granted. At the AMA, we are advocating to reduce the tsunami of regulatory penalties and working to make it easier for physicians to adopt new payment models. And, we’re doing all we can to ensure physicians in all specialties, practice sizes and locations across the country can participate successfully in new payment and delivery models that allow them to efficiently provide the best care to patients.

**Tell me:** What’s the biggest challenge for you in adopting new practice models? Weigh in with a comment below.