Resident & Fellow Section (RFS) advocacy initiatives

Become a member

Make an impact in your career and support residency issues.

Join AMA

Through the Resident and Fellows Section (RFS), residents and fellows work to advance policies that address health care concerns of patients and physicians. The AMA and RFS’ advocacy campaigns focus on some top issues affecting physicians and patient health outcomes.

Increasing graduate medical education positions

Workforce experts predict that the United States will face a shortage of approximately 90,000 physicians by the year 2025. To protect patient access to care, the AMA continues to support legislation to increase Graduate Medical Education (GME) positions instead of cutting the federal funding that supports medical training.

AMA has also voiced its support for the “Creating Access to Residency Education Act of 2015 (CARE Act),” which would create a $25 million grant program for graduate medical education (GME) positions in states with a low ratio of medical residents relative to the general population.

Most recently, the AMA urged support for the Resident Physician Shortage Reduction Act of 2017, a federal bill that would expand Medicare funding for 15,000 additional residency positions.

The AMA supports the maintenance and expansion of GME as part of its SaveGME campaign.

AMA GME Policies
CARE Act Advocacy Letters

Advocate to save GME

URL: https://www.ama-assn.org/member-groups-sections/residents-fellows/resident-fellow-section-rfs-advocacy-initiatives

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Contact your elected officials to urge them to support funds for medical training.

**Reversing the opioid epidemic**

In 2014, more than 25 states, specialty and other health care associations were invited by the AMA Board of Trustees to help reduce the nation's burden from prescription opioids and heroin. The AMA, along with these organizations formed the Task Force to Reduce Opioid Abuse. Visit the AMA’s opioid epidemic website to find information about steps you can take to help end the epidemic.

**Putting patients before politics: health care reform**

The AMA has long advocated for health insurance coverage that puts patients before politics and provides pluralism, freedom of choice, freedom of practice and universal access for patients.

AMA opposes passage of health reform proposals that if they were to become law would result in millions of Americans losing health insurance coverage, while the safety net provided by Medicaid would be severely eroded.

**Health insurance mergers**

The AMA has tirelessly opposed anticompetitive health insurer mergers. The AMA’s merger advocacy efforts on behalf of patients were rewarded when, on Jan. 23, 2017, a federal judge issued a ruling blocking the proposed Aetna-Humana merger.

**Navigating medicare payment & delivery change**

A final rule released on Oct. 14, 2016 by the Centers for Medicare and Medicaid Services (CMS) details the final regulations for implementation of the Medicare Access and CHIP Reauthorization Act (MACRA), the historic Medicare reform law that repealed the Sustainable Growth Rate (SGR) formula and created the Quality Payment Program (QPP).

The final rule creates 2 payment pathways for physicians—alternative payment models (APMs) and the Merit-based Incentive Payment System (MIPS).

Although MACRA does not immediately impact residents and fellows, it is critical to stay informed of
the many changes MACRA and other forces are producing in health care.

Learn more on the AMA's Medicare Payment & Delivery Changes section.

Residents and fellows Bill of Rights

The RFS’ advocacy for the welfare of residents and fellows includes a bill of rights (PDF) that lists the most important rights for residents and fellows, among them:

- The right to a graduate medical education experience that facilitates professional and ethical development
- Timely and substantive evaluations during each rotation
- A safe workplace that enables residents & fellows to fulfill their clinical duties and educational obligations
- A reasonable work schedule that is in compliance with duty-hour requirements