
Health care policy debates need to include the trusted voices of physicians advocating for their patients, AMA President Patrice A. Harris, MD, MA, told hundreds of physicians and state medical society executives and staffers at the AMA State Advocacy Summit in Bonita Springs, Florida.

"The discussions in the halls of state legislatures and in Washington, D.C., and the executive branches in our states and actually also in the courts are filled with many voices but unfortunately not always filled with science and evidence," Dr. Harris said. "We are trusted in these conversations because we do our best at all times to rely on fact—to rely on the science—to give opinions that are evidence based and to always remember that we are, at the end of the day, advocating for our patients."

Dr. Harris described how, through its advocacy efforts and partnership with the nation's state and specialty societies, the AMA helped secure more than 140 state-level victories, including:

- Removing administrative barriers such as prior authorization
- Enhancing the public health with victories against vaping
- Increasing access to evidence-based care for opioid use disorder
- Preserving the physician-led health care team

"Unfortunately, we are in an era defined by a profound distrust in American institutions," said Dr. Harris, an Atlanta psychiatrist. "In media and education, in technology and at every level of government—trust seems to have sunk to an all-time low. It is important to remember, said Dr. Harris, that "People still trust us. Their doctors."

Prior authorization

"We fight back against prior-authorization requirements because we see the negative impact on our patients and we know these requirements create unnecessary headaches and burdens for our practices," Dr Harris said. Payers continue to implement harmful policies that delay patient care and interfere with physicians' ability to practice medicine.
The AMA has supported federal legislation to streamline prior authorization in Medicare Advantage plans and to improve the process in states across the country. Efforts include using the FixPriorAuth.org website to capture hundreds of patient and physician stories that bring home the negative impact prior authorization has on patient care.

**Surprise medical bills**

"We work toward reasonable legislation and regulation on surprise billing because we don't want our patients stuck with bills that are unexpected and they cannot afford," Dr. Harris said. The AMA believes patients should only be accountable for normal in-network cost-sharing amounts and supports an independent resolution system for settling payment disputes between physicians and insurers.

The AMA has worked with state medical associations and national specialty societies to:

- Craft principles to guide surprise-billing legislation and policymaking
- Work closely with members of Congress to develop legislation that adheres to those principles
- Prevent an objectionable congressional bill from being passed
- Stop numerous state bills that would reduce the adequacy of provider networks

Learn more about the AMA's work to prevent surprise medical bills.

**Health insurance coverage**

"We continue our call for Medicaid expansion because we know it improves access to care and the health of our patients," Dr. Harris said. The AMA promotes Medicaid expansion to cover the uninsured in all 50 states and has opposed Medicaid work requirements in state legislatures and in the courts.

The AMA continues to seek opportunities to improve the Affordable Care Act and expand options to those who do not qualify for subsidized coverage. Learn more about the AMA vision on health care reform.

**The opioid epidemic**

Dr. Harris, who chairs the AMA Opioid Task Force, also touched on AMA advocacy efforts to help end the opioid epidemic while ensuring that patients in pain maintain access to the medications they need. "We speak up for our patients in chronic pain and those who have substance-use disorders because they deserve the same care and compassion as anyone with any other chronic disease," she said, adding that the AMA also advocates for "policymakers to enforce mental health parity laws."
The AMA has released an in-depth analysis of the opioid epidemic response by four states: Colorado, Mississippi, North Carolina and Pennsylvania. The report, "National Roadmap on State-Level Efforts to End the Opioid Epidemic; Leading-edge Practices and Next Steps," analyzes successful strategies used and lessons learned to guide policymakers and others in the months ahead.

E-cigarettes and vaping

When it comes the dangers of e-cigarettes and vaping, Dr. Harris said "half measures are never acceptable," echoing her recent comments on how a new Trump administration policy to limit flavors in some vaping products was "a step in the right direction, but does not go far enough."

At minimum, a total ban on all flavored e-cigarettes, "in all forms and at all locations," is prudent and urgently needed, she said.

Gun violence

Dr. Harris also noted the AMA's advocacy for common sense gun laws. The AMA supports the Bipartisan Background Checks Act of 2019, which the U.S. House of Representatives passed in February but has been stalled in the Senate. AMA advocacy efforts helped secure long-sought funding for gun-violence research by the National Institutes of Health and the Centers for Disease Control and Prevention.

Scope of Practice

The AMA is leading the effort against inappropriate expansion of scope of practice by nonphysicians. "We engage in hundreds of scope of practice state battles because we believe physician-led health care matters," Dr. Harris said.

This support of physician-led teams, which is based on the AMA's longstanding principle to protect the health and safety of patients, is the cornerstone of the AMA's scope of practice campaign. Our advocacy efforts, including leading the Scope of Practice Partnership, are having a positive impact in state houses across the country.

More articles in this issue

- Jan. 17, 2020: State Advocacy Update
- Jan. 17, 2020: Judicial Advocacy Update


Copyright 1995 - 2021 American Medical Association. All rights reserved.