

Michaela Sternstein, JD, discusses advocacy at the state level

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Featured topic and speakers

In today's COVID-19 update, Michaela Sternstein, JD, vice president of the AMA's State Advocacy Resource Center, talks about the recent State Advocacy Summit and what physicians need to know about advocacy efforts at the state level, including trends, vaccine distribution, access to care and telehealth.

Learn more at the AMA COVID-19 resource center.

Speakers

- Michaela Sternstein, JD, vice president, AMA State Advocacy Resource Center

Transcript

Unger: Hello. This is the American Medical Association's COVID-19 update. Today, we're discussing highlights from our recent State Advocacy Summit and advocacy issues that relate to COVID-19 with Kai Sternstein, vice president of the AMA's Advocacy Resource Center in Chicago. I'm Todd Unger, AMA's chief experience officer in Chicago. Kai, our virtual State Advocacy Summit kicked off last week with a keynote from political strategist, Bruce Mehlman. What are some of the key policy trends we can expect to see in 2021, and how do we expect those trends to be influenced by the pandemic?

Sternstein: Yeah. Hi Todd. Thank you so much. Yeah, we were so thrilled to have Bruce Mehlman kickoff our meeting. He's a visionary. He works closely with the AMA and he monitors very closely trends across the country, both at the state level and federal level. I think if there's any message that came through loud and clear while, we are in a new year and that new year brings a lot of big questions, there is a lot of room for optimism and opportunity for our physicians and their patients in this upcoming year. I think that that obviously, tempered with the reality of what we've all been through in 2020, still a lot work to be done, but there are a lot of positives as well. We're ready to seize those positives on behalf of the medical profession and make some big headway in this upcoming legislative session across the country.

Unger: Well, not surprisingly, one of the key topics that everybody wanted to know about was vaccine distribution. How can physicians help address some of the challenges that we're seeing in terms of supply, mistrust, misinformation at the state and local levels?

Sternstein: That's a great question. Because of the issue and the prominence of the issue, we had to make a last-minute pivot on our agenda, made it the first session and really highlighted. It was a fantastic session moderated by our president, Dr. Susan Bailey. We know that there are going to be many ongoing challenges with vaccine distribution, and I think one of the key takeaways from the panel is let's remember, we are going in the right direction. One of the key messages that I think came through is that all of the challenges that we're going to be facing can be overcome if we work together. The AMA remains committed to continuing all of our efforts to support distribution throughout the country and its territories. We want to ensure equitable administration of the vaccine. We want to support physician's efforts to build trust in the safety and efficacy of the vaccines, to build towards immunizing the U.S. population. We know that physicians play a key role in building that important trust with patients across the country.

I think that physicians, what we heard is you have an opportunity to play a huge role in debunking myths and misinformation regarding vaccines. This is for both patients and fellow health care professionals. I think our leadership at the AMA has been phenomenal in this space. We have been vocal at the national and local news levels, within social media, advocating for equitable vaccine distribution. We continue to work with leaders such as the folks that were on our panel, the CDC, the Association of Immunization Managers, Chicago's Community Trust, to provide accurate information to physicians and patients. We know that patients are going to rely on their physicians to let them know about the vaccine, its effectiveness, the fact that it's trustworthy. They're going to expect their physicians to let them know about their eligibility during this time, especially when limited doses are available. So, we will continue to advocate that as a promise and work closely with state Medical Associations, to make sure that physicians know what they need to know about this issue.

Unger: I was just going to say, one of the greatest pleasures of looking at my social feeds these days is seeing all of these AMA physicians getting their vaccines. When we think specifically about what

steps physicians can take to help with the efforts that you're talking about, what are those?

Sternstein: Yeah. I mean, exactly Todd and first of all, they need to get vaccinated themselves. They need to recommend their vaccinations to their patients. Physicians have an opportunity to enroll as vaccine providers, either at their own facilities or at a centralized local institution. There are tools available to help with promotion and vaccine follow-ups, so physicians are not alone. We heard from Texas Medical Association on our panel, about how physicians are being directly engaged in meetings and efforts with public health officials at the state level, being at the table. And, we talk about this all the time in state advocacy, being at the table gives physicians in medicine an opportunity to ensure that physicians have the most up-to-date information and are able to provide input. While Texas Medical Association may be very large and have a lot of resources, I think the one message that they sent is all medical societies can get involved.

I mean, you can get involved as a physician on state vaccine advisory committees, being part of state decision-making processes that can help state officials also become better informed. It would allow the physicians that get involved and the physician community to understand hotspots, get advanced warning and notice about where vaccines are going to become available. So, really, really critical. I think to stay involved and be involved in assert yourselves. I think finally, the AMA. I have to say, we have developed an incredible amount of resources to help answer questions. We're even going to have a timely January 19th webinar, featuring Dr. Marie Brown, who will help physicians understand why vaccine hesitancy exists, how to communicate with storytelling and metaphors, not just numbers. That webinar's called "Vaccinations: Roadmap for Success" and information is available on the AMA website for anyone that's interested.

Unger: That's fantastic. We've had a number of webinars on the topic of vaccines. They've all been just tremendous, so I encourage our viewers out there to tune in to the upcoming webinar on January 19th, with Dr. Marie Brown. Kai, another major topic discussed at the summit was the advancement of telehealth. What can you tell us that, what physicians need to know about telehealth in 2021?

Sternstein: If there's one issue that has just exploded during this time of the pandemic, I mean, people say that in the last 10 months, we've made 10 years' worth of progress when it comes to telehealth. It really is absolutely astounding. There was a widespread adoption of telehealth during the pandemic. Physicians, not surprising to us, because we know physicians and we know how incredible they are, but quickly pivoted to implement telehealth in their practices, and patients embraced it as well. In the months after the pandemic hit, every state took action to expand access and coverage and payment of telehealth. Now, we have an opportunity to actually make some of those changes permanent, so we're looking at executive orders that governors have done, that were temporary to get us through the pandemic, and we're now going to be working in the state legislatures in collaboration with state medical associations, to make sure that the advancements we've made in telehealth are here to stay.

Unger: That access to telehealth, it just has been tremendous over the past few months, and I am excited to see AMA working with physicians to shape that for the future.

Sternstein: Yeah. I think it's really important for physicians to know that we still have a lot of work to do in this space. We recognize that there are, and for the AMA in terms of priority, we have at the state level, four main areas. First, we're going to continue to ensure coverage of services provided via telehealth on the same basis as services provided in-person. This includes eliminating all unnecessary barriers, such as originating site and geographic restrictions. Second, we will work to ensure that all contracted physicians can provide care to their patients via telehealth. Third, we're going to continue to advocate for equitable and fair payment of services provided by telehealth. I think, really importantly, we are going to be pushing really hard to encourage broad access to telehealth. We want to narrow the digital divide. We want to make sure that patients have technology that they need, to engage in the highest quality of telehealth. We're looking to expand broadband access, and finally, help improve digital literacy amongst our patients.

Unger: Well, that that topic of access to care was a topic that was covered across multiple sessions and beyond telehealth. Can you talk to us about some of the highlights in regard to that?

Sternstein: Yeah. Tons of issues were covered. We've got a lot to work to do in these upcoming sessions, but as it comes and as we focus on access to health care, I mean, one of the main places we're going to focus on is breaking down barriers in Medicaid, when it comes to receiving care such as mandating coverage for COVID-19 testing and care, expanding coverage options under Medicaid, suspending prior authorization requirements, loosening up restrictions to allow more physicians to actually see Medicaid patients and suspending cost-sharing, so that low-income patients can access the care they need, even if they're facing financial hardship. This is a huge focus for us, and we're excited to partner with states across the country.

We think it's also important to note, I think, that similar actions were taken in the commercial market as well. We saw countless departments of insurance bulletins and executive orders, addressing barriers to care since March. So, it's going to just be important that we continue to work with our state partners to determine what changes need to be made, what needs to be made permanent and also be ready to be nimble and quick, and address new and emerging issues as they come up.

Unger: Well, speaking of emergency issues, what do you see as the biggest opportunities, at the state advocacy level for 2021?

Sternstein: Well, I think we have a lot of issues that we're looking at. Certainly, I can't talk about any work that we do without talking about health equity and our focus on the social and structural determinants of those inequities. Equity is an issue we saw drummed throughout our conference. We do not look at equity as a standalone issue. Equity is something that needs to be infused and is infused in every issue that we're working on. We have several issues that are priorities for us, like I

talked about expanding Medicaid issue, addressing disparities in maternal outcomes, ensuring that the data that drives policy-making accounts for race and ethnicity and also looking and pushing hard at the way insurers and their policies make a direct and indirect limits on access to care for minoritized communities. So, really understanding these issues and seeing how they link policies, even those that are outside the traditional realm of the things that we work on, such as housing and employment policies, really important for us.

But, then there are other issues also, that we're looking at. We are looking at protecting the practice of medicine and defeating inappropriate scope expansion. We're looking at private payer issues. We're back to the issues that are the bread and butter of what we work on. The opioid overdose epidemic is front and center for us as well. Really critical for us to keep focused there and understand that we ... there are some issues that have arisen throughout this pandemic that alert us to the fact that we are not in the clear when it comes to the overdose epidemic. We care about a lot of issues, and I think the issues that affect private practicing physicians also, as well as those that are in bigger systems, that are employed by big systems. We're looking at all those issues and seizing opportunity where we can get it.

Unger: Well, Kai, if a physician wants to get involved in our advocacy efforts, what should they do?

Sternstein: Well, they can contact me, but absolutely, here's the thing. Physicians, we need your engagement. We need you. We have an Ambassador Program at the AMA, where you can get involved. Become a member. Join us. We can't do this work without physicians. They're what drives everything that we do. We need you to attend our National Advocacy Conference, that's scheduled February 23rd through 24th. It's coming up and registration information can be found on our website. We need you to join your state medical association. Get involved. Have your voice heard. If you have a passion, an issue that you want to have raised, phone your state medical association and make sure that they hear you. Same thing with your national specialty society. We are all interconnected. We cannot do our work without the partnerships that we have, and I just strongly encourage engagement and activism by physicians. We need the advocate physicians, the folks that are interested in advocacy, now more than we ever have.

Unger: That is absolutely true. So, thank you very much. I just want to remind our viewers out there that they can begin to register for AMA's National Advocacy Conference, that's running on February 23rd and 24th, and you can find registration information on the AMA website. Thanks so much for joining us, Kai. It's great to talk to you and get updates from the State Advocacy Summit. We'll be back soon with another COVID-19 update. For resources on COVID-19, visit the AMA site, [ama-assn.org/covid-19](https://www.ama-assn.org/covid-19). Thanks for joining us. Please take care.

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