AMA membership growth a sign that physicians demand change

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In an era of celebrated individualism and sagging membership in organizations across industries, the AMA has pulled off an exceptional feat: 10 consecutive years of membership growth.

In fact, dues-paying membership at the AMA has increased 35% since 2011, fueled by a significant growth in our core target areas that include active physicians, medical students and residents. Last year, amid the worst public health crisis in a century, AMA membership continued its remarkable rise, recording its highest year-over-year growth since 1949.

What is driving this notable hot streak?

A number of factors, including an expanded and ever-growing digital presence, targeted physician engagement, a more sophisticated digital marketing approach, and a popular national campaign, Members Move Medicine, that puts practicing physicians in the spotlight and underscores the importance of a collective voice in medicine to bring about real change.

But as chief executive officer during this 10-year-run, I believe our success also is rooted in our ability to tap into what we know physicians most need to navigate the complex modern world of health care—an ally. And a powerful ally at that.

The strategic focus of the AMA has evolved some in my time as CEO, but at its most basic our work is anchored in three important areas:

- Removing obstacles that interfere with patient care.
- Driving the future of medicine through improved training, education, and innovation.
- Leading the charge to prevent chronic disease and confront public health crises.

Deeply embedded in each of these areas are three essential accelerators—innovation, advocacy and equity—that not only drive this work but represent our values in achieving our goals.

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Innovating for tomorrow’s doctors

Our strategic work is as varied as the physicians we serve, but each one seeks to advance medical practice, improve public health, or alleviate common pain points that we know from experience and from our own research are major factors in physician burnout and dissatisfaction.

For example, the AMA has made significant investments to better prepare the next generation of physicians to tackle the unique challenges in medicine today. We’re doing this through our Accelerating Change in Medical Education and Reimagining Residency initiatives that create communities of innovation that are already transforming medical education and training. And we’re equipping physicians across the country with CME through the AMA Ed Hub™ that launched in 2019.

The AMA’s efforts to prevent chronic disease, which accounts for nearly 90% of all health care spending in the U.S., is specifically geared to reduce the rise in hypertension and type 2 diabetes.

In 2020, the AMA helped launch a national public awareness campaign called Release the Pressure—in partnership with Essence magazine—that provides Black women with resources to identify, track and manage their blood pressure numbers. This builds on our long-standing Target: BP™ initiative with the American Heart Association that works to reduce the number of Americans who suffer heart attacks and strokes by urging physicians and care teams to prioritize blood-pressure control.

Attacking physicians’ burdens

Removing the obstacles that interfere with patient care is work of immediate and urgent importance to physicians. It targets the ever-growing list of administrative hassles and headaches that are heaped on physicians’ shoulders and that get in the way of what they most want to do—care for their patients.

One of our most important ongoing efforts is to “right-size” the prior authorization process that requires physicians to first get insurer approval for certain drugs, tests and treatments for their patients. These onerous and often needless requirements can delay care and sometimes force patients to abandon care altogether.
We have helped build industry consensus around key improvements to the prior authorization process, pushed legislation in Congress to implement them, and built a grassroots campaign in support of reform. Our advocacy work to reduce administrative burdens scored a big win for physicians last year when the Centers for Medicare & Medicaid Services agreed to reduce documentation in the evaluation and management (E/M) reporting process—the first such overhaul of E/M codes in more than 25 years.

We are also working to reduce these burdens through our work to advance digital innovation in health care spans telehealth, AI and improving interoperability of relevant clinical patient data at the point of care. Some of our efforts are anchored in a Silicon Valley business enterprise we created called Health2047 that combines expertise from diverse backgrounds—physicians, engineers, coders, behavioral economists, psychologists—in pursuit of new digital technologies in health care. Health2047’s ever-expanding portfolio now includes eight promising start-ups.

**Addressing pervasive health inequities**

And over the last two years, with the creation of the Center for Health Equity, the AMA has joined the effort to help eliminate longstanding inequities within our health system, remove barriers to care, and improve outcomes for Black, Latinx, Indigenous and other historically marginalized populations. In May, we released our plan to embed racial justice and advance health equity, which lays out five strategic actions to address these inequities, and, importantly, work to improve patient outcomes and the quality of care for all people.

This plan builds on our advocacy work over the past year to reverse executive actions that restricted access to care for LGBTQ+ patients, advance policies directed at maternal health improvements, improve care for unaccompanied children at the border, further expand Medicaid, expand access to reproductive health care for low-income women, and increase incentives for physicians to practice in underserved areas.

This is far from a comprehensive list of our efforts, but they underscore the type of work we do—day in and day out, even in a pandemic—that is really resonating with the physicians, medical students and residents. It is work intensely focused on improving both the clinical environment and patient outcomes, on building practice sustainability, advancing equity, and on elevating the voice of our physician community to those who can lend a hand.

These aren’t easy lifts. Rather, these involve big, seismic changes to health care that the AMA is focused on changing. And by placing their trust and support in us, more and more physicians are recognizing the AMA as their powerful ally in patient care.

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