The AMA’s advocacy team had a busy year in 2021. They worked on several fronts, tackling the COVID-19 pandemic through vaccination campaigns, averting a nearly 10% cut in Medicare physician payments, and collaborating on a lawsuit to stop implementation of a narrow but critical provision of the No Surprises Act.

“There really was no let up from day one,” Todd Askew, the AMA’s senior vice president of advocacy, said during a recent episode of the “AMA Moving Medicine” series. “It was just a tremendous, tremendous year of important items and accomplishments from January straight through December.”

Looking ahead to 2022, rebuilding physician payment models of care presents the biggest opportunity for AMA advocacy, noted Askew. “It’s not going to be a slam dunk and it’s not going to be done in one year, but if we’re going to start on this journey, we’ve got to sit down and get going and this is the time to do it,” he said.

Fundamental rethink on payment

Medicare cuts to physicians play on repeat each year, said Askew: “There’s no stability, there’s no predictability.”

The “way the payment structure is designed under” the federal government’s Merit-based Incentive Payment System, with four separate, poorly aligned programs “doesn’t make any sense,” he added. Opportunities to pursue alternative payment models never fully came to fruition. Additionally, the system doesn’t keep up with inflation.

Budget neutrality provides increases for certain services or type of provider, but no new money, he emphasized. Other Medicare providers have built-in updates, a medical economic index or inflationary growth factor, that reflect an increase in the cost of providing services. Physicians have no
such benefit, said Askew.

“A legacy of multiple experiments of different systems and action taken to avert a massive cut a
decade ago” has led to this result, he explained. Physicians need to pull together and come to some
agreement on how to provide sustainable payment rates that reflect increasing costs of care and
promote innovative payment models, he said.

The AMA’s advocacy team has been speaking with leaders across the Federation of Medicine about
reforming the way Medicare pays physicians. “I think there's enthusiasm and a strong agreement that
we need to sit down together and come up with a new way of doing this. I think that's the greatest
opportunity that we have in 2022,” said Askew.

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national and state issues impacting physicians, patients and the health care environment.

Recognizing telehealth’s value

This year also presents a tremendous opportunity to promote and improve access to telehealth, which
has been “one of the few bright spots” of the pandemic, said Askew.

Physicians and payers once reluctant to embrace the technology are now using it to triage patients or
provide ongoing care outside of physician offices and hospitals. “A lot of unnecessary exposure was
avoided. The value of telehealth has really been proven,” he said.

Statutory changes are needed to preserve this option for Medicare patients beyond the COVID-19
public health emergency, he added.

AMA advocacy made a difference in several critical areas in 2021. Passage of the American Rescue
Plan Act of 2021 “opened up access to Affordable Care Act coverage to many millions of more
people, both through increased access to subsidies and other improvements to the program,” said
Askew. The Supreme Court’s dismissal of a significant challenge to the ACA was another big win.

The AMA also worked to support physicians and the health care system to promote COVID-19
vaccinations, said Askew. The AMA will continue to work with doctors, hospitals, employers, unions
and the government to get as many people vaccinated as possible “because vaccination is the way
out of this,” he said of the pandemic.
“AMA Moving Medicine” highlights innovation and the emerging issues that impact physicians and public health today. You can catch every episode by subscribing to the AMA’s YouTube channel or the audio-only podcast version, which also features educational presentations and in-depth discussions.