

April 1, 2022: State Advocacy Update

Advocacy tools on physician-led care

As part of an ongoing effort to create accessible advocacy tools on scope of practice, the AMA recently published a set of issue briefs providing evidence on the importance of physician-led care.

These tools are the newest edition to the AMA's expansive scope of practice campaign and one example of the types of tools and resources we provide to our federation partners. The AMA is committed to supporting physician-led care and fighting scope of practice expansions that threaten patient safety.

- [Protect access to physician-led care \(PDF\)](#) demonstrates that the best way to support high-quality care and lower costs is to keep physicians as the leader of the health care team. With higher levels of education and 20 times the clinical training as compared to nurse practitioners, physicians are trained to be the leaders of the health care team.
- [Physician-led care supports patient access to care \(PDF\)](#) debunks the myth that scope of practice expansion is the best way to increase access to health care in rural and underserved areas. Instead, evidence shows that physicians and nurse practitioners tend to practice in the same areas of a state irrespective of state scope of practice laws. Better policy options for increased access to care include telehealth expansion, increasing physician residency positions, loan forgiveness programs for physicians in rural and underserved areas, and programs that encourage students from underserved areas to go to medical school.
- [Physicians are trained to lead \(PDF\)](#) summarizes the educational differences between physicians and nurse practitioners. Physician education, residency and assessment and certification are more comprehensive, standardized and include the robust experience necessary to lead health care teams.

Find more information about the AMA's research and resources on scope of practice.

Increasing naloxone access requires all-of-the-above advocacy

Making naloxone available over the counter, removing its prescription status and changing state laws to allow for greater “distribution” of naloxone are key actions to help save lives from opioid-related overdose, said AMA Chair Bobby Mukkamala, MD, at a public workshop sponsored by the Reagan-Udall Foundation for the Food and Drug Administration (FDA). Dr. Mukkamala, who also serves as chair of the AMA Substance Use and Pain Care Task Force, emphasized the AMA’s strong support for physicians prescribing naloxone to patients at risk of overdose, working closely with harm reduction organizations and supporting standing order protocols to enable individuals to obtain naloxone directly from a pharmacist without a patient-specific prescription.

“We encourage state physician leaders—whether a state physician or surgeon general or a public health agency official—to sign county- and state-wide standing orders for naloxone,” said Dr. Mukkamala. “We also strongly encourage physicians to prescribe naloxone to patients at risk of overdose.”

“We need to think of naloxone as a life-saving tool just like we think of EpiPens as life-saving tools,” said Dr. Mukkamala. “We need to continue to work to remove the stigma about overdose and the benefits of naloxone. There is no stigma, for example, for using an EpiPen. People don’t try to have an anaphylactic reaction. When we see a blue patient the only thing that goes through our mind is how to make them pink again. The adrenaline of that moment takes over and we go into lifesaving mode. Whether the patient is blue from eating a peanut they are allergic to or from an overdose of an opioid, our compassion and care is the same.”

“Naloxone can’t save a life if it’s unaffordable or not accessible for any reason,” said Dr. Mukkamala, who called on manufacturers to submit OTC applications and for the FDA to take additional actions to remove the prescription status of naloxone. “Manufacturers want to sell as much product as possible, and while that is not surprising, we are in an unprecedented epidemic.”

The current prescription status of naloxone, for example, hinders harm reduction organizations from bulk purchasing of naloxone. Dr. Mukkamala also gave additional actions to increase access to naloxone:

- Continue the work to normalize naloxone as a standard first aid tool.
- Encourage employers, colleges and others to make sure that naloxone is as available as other well-known harm reduction tools like EpiPens and condoms.
- States should ensure laws and policies do not unintentionally allow the existence of a naloxone prescription or sale to someone to be used against them in any way, such as in health or life insurance applications.

“When we do these things, we will save these lives,” said Dr. Mukkamala.

Learn more information about naloxone access (PDF).

More articles in this issue

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