Physicians must be empowered to put patients first: AMA president

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Whether fighting to stop Medicare pay cuts, fix prior authorization or reduce administrative burdens that lead to burnout, the AMA has physicians’ backs. And when it comes to advancing health equity and protecting patients’ access to evidence-based reproductive health care, gender-affirming services and reliable scientific facts, the AMA won’t back down.

“You know and I know that we did not pick these fights, and that our organization isn’t on any political team,” said AMA President Jack Resneck Jr., MD, during his speech at the opening session of the 2022 AMA Interim Meeting in Honolulu. (Read Dr. Resneck’s speech.)

“The AMA is fiercely nonpartisan—we have evidence-based, open debates in this House and our actions are driven by the policies that you create,” Dr. Resneck added. “And you represent every state, every specialty, employed and independent settings, rural and urban communities. You come from every point across the political spectrum. I can attest to that last part from the emails you all send me. Keep ’em coming!”

Restoring joy in medicine

With all the pressures that physicians face, it’s not surprising that burnout rates are soaring—going from 38% to 63% in 2021, with one in five physicians saying that they will leave the profession in the next two years.

“We haven’t lost the will to do our jobs. We are frustrated that our health care system is putting too many obstacles in our way,” Dr. Resneck said.
Telling physicians “to be more resilient, do a little more yoga, and to enjoy a free dinner from the hospital CEO isn’t going to heal the burnout. While wellness has its place, to focus solely on resilience is to blame the victim,” the AMA’s president said. “We need to fix what’s broken—and it’s not the doctor,” he said to big applause from delegates.

“That’s why we need the AMA. That’s why we need organized medicine. And that’s why we need each other, to remove those obstacles that are driving burnout in the first place—barriers erected in Washington and state capitols, by health insurers and PBMs, and in our places of work.”

This includes ending the annual exercise of fighting Medicare payment cuts—such as the 8.5% cut scheduled to go in effect Jan. 1—and fixing prior authorization.

“Restoring joy in medicine—it also requires reducing friction and obstacles that interfere with quality patient care, and there’s really not a more infuriating example than onerous prior-authorization demands,” said Dr. Resneck. In his role as vice chair of the University of California, San Francisco, School of Medicine’s dermatology department, Dr. Resneck finds himself in frequent arguments with “so-called peers” advocating for the treatments his patients need.

“It’s not just costly and annoying for our practices—it does real harm to our patients,” he said. “But I’m glad to report that the momentum is shifting—almost every policymaker I talk to has experienced an unfair delay or denial for themselves or a family member.”

Fixing prior authorization, reforming the Medicare payment system and reducing physician burnout are three critical components of the AMA Recovery Plan for America’s Physicians, Dr. Resneck noted. The others are supporting telehealth and fighting scope-of-practice expansions that threaten team-based care.

**Standing up for patients**

Dr. Resneck highlighted the new battles physicians have been facing since the onset of the COVID-19 pandemic. These including the spread of disinformation about vaccines and masks, politicizing and mispresenting the AMA’s work to advance health equity, criminalizing evidence-based, gender-affirming care and restricting access to abortion—which, Dr. Resneck noted, the AMA House of Delegates has “recently affirmed the importance of access to comprehensive reproductive health care services, including abortion and contraception.”
Politicians practicing medicine through legislation “are creating chaos,” Dr. Resneck said, and leaving physicians in impossible positions that require consulting with hospital attorneys as their patients’ conditions worsen or transporting unstable patients across state lines so they can get the care they need without political interference.

“Make no mistake: When politicians insert themselves in our exam rooms, interfere with the patient-physician relationship, when they politicize deeply personal health decisions, or criminalize evidence-based care—we will not back down,” Dr. Resneck said. “We will always stand up for our policies, for physicians and for our patients,” he added, noting that the AMA has filed briefs in about a dozen state and federal courts, met with White House officials, testified before Congress, spoken out in news media interviews and will “continue to work on every front to mitigate the risks our patients face in the post-Dobbs era.”

“I’m neither deterred, nor hopeless—I’m determined,” Dr. Resneck concluded.

“Yes, there are unprecedented attacks on our profession, on science, and on our patients, but—like me—you’re here because you believe our collective action can make a difference,” he added. “You believe in science and in the humanity of our profession.”