



The AMA: A Cartography of Progress

Address to the House of Delegates

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Madam Speaker, Mister President, members of the Board, delegates, and guests:

First off ... happy birthday! Just four weeks ago the AMA turned 170 years old. So, let's give Nathan Davis and colleagues a round of applause!

1847 was a long time ago. What do 21 states – including Wisconsin, California, Minnesota and Oregon – all have in common?

None of these states had entered the Union by 1847.

In the 60 years that followed, at least one new state was added each decade. Those of us born in the 1950s and 1960s have an intuitive sense of stability about our country's map – we don't think of it as having been so dynamic.

In fact, when I was in grade school and learning my states, I got hung up on the fact that Michigan was in two pieces. I couldn't understand why there was an Upper Peninsula ... couldn't get my arms around that.

After putting up with this for a while, my mom looked at me and said, "Jimmy, Michigan was and always will be in two pieces ... so it's time you just move on."

Moms are great, aren't they! That day I learned something about maps ... but also about the important acceptance of facts.

I'll return to maps in a moment, but first I'd like to introduce a new way of conceptualizing the work that emanates from the policies of this House.

In past years, I've spoken of our work across three strategic focus areas ...

... one aimed at improving professional satisfaction and practice sustainability ... which is sorely needed given the deterioration of the practice environment over the last quarter century.

A second focus area is aimed at creating the medical school of the future ...

and a third on improving health outcomes for patients with pre-diabetes and hypertension.

The work on these three areas has gained traction and national attention. But, additionally, they've begun to interconnect and broaden – incorporating critical advocacy work and organically linking to other initiatives.

So, it's now possible to capture and represent the totality of AMA's work as three strategic arcs – each with one of the focus areas at its core.

One strategic arc develops critical tools and policies for our field ... efforts that emerged from our professional satisfaction focus and created our practice transformation series StepsForward, our MACRA Action Kit, our Payment Model Evaluator, our expanding innovation ecosystem, as well as our work across digital medicine.

Creating tools and policies to promote satisfaction also extends to our recent work defining principles for better electronic health record usability.

The work of this arc also created the principles to reform prior authorization ... principles that are now supported by more than 100 organizations ... and are aimed at correcting deep flaws in prior authorization.

Our second strategic arc guides lifelong professional development and physician growth ... this began with our work to create the medical school of the future, but now extends to the redesign of our Education Center, our initiatives to combat physician burnout, and of course to the JAMA network.

Our third strategic arc is to improve the health of the nation, particularly as it pertains to chronic disease, which accounts for 80 percent of our nation's three trillion dollar health care spend.

This third arc includes formalized partnerships with other leading organizations, such as the CDC and, now, the American Heart Association ... as well as our coordinated efforts to help change patient behavior by integrating prevention into the care setting – a daunting task since it has to be done in a way that does not create additional time burden on physicians.

This also encompasses our work in personalized medicine, in achieving greater health equity, and our efforts to reduce the opioid epidemic.

These three strategic arcs – producing critical tools and policies for the field, guiding professional development, and working to improve our nation’s health – these three build upon our original three focus areas ... and tell a more complete story of the AMA.

That’s a story of leadership in medicine.

So, back to maps ... let’s take a cartographer’s view of what leadership looks like.

Our successful work to block health insurance mergers – one of our most important advocacy efforts of the past year – was made possible thanks to a well-coordinated effort to engage partners in the states that would have been hardest hit by insurer consolidation.

17 state associations joined our antitrust coalition, thus protecting accessibility and affordability for millions. This advocacy win fits firmly in the strategic arc of improving the health of our nation.

Our Transforming Clinical Practice Initiative is using clinical coaching and other quality improvement strategies to help physicians increase patient access to information and assists in practice transformation ... part of our arc producing critical tools and policies for the field.

Our consortium to create the medical school of the future – the foundation of our arc to enhance professional development – now includes 20 percent of our country’s medical students.

We created a new field called Health Systems Science and, in January, published the first textbook in this “third” science of medical education, joining basic and clinical sciences. Health Systems Science includes core information on health care delivery,

quality improvement, leadership, population health, economics, as well as the social and ecological determinants of health.

The AMA also recently launched, in partnership with the Regenstrief Institute, a new digital training platform that will ensure our future physicians learn how to use electronic health records to deliver care in a modern health system.

Our expanding innovation ecosystem includes our co-creation of the accelerator MATTER – now with 200 startup companies – right here in Chicago. Our reach also touches SMART Health IT in Boston, and Sling Health in St. Louis and five other diverse cities.

Our Silicon Valley-based innovation studio – Health 2047 – is in the initial phase of developing products aimed at improving our health system, and importantly, giving physicians more time with their patients by reducing administrative workloads and improving clinical data liquidity and organization.

The overarching goal of Health2047 over the next few years is to relieve burdens equal to returning one hour to every physician's work day.

Now, I realize you all want two or three hours returned immediately, but we first must gain a toe-hold in the daunting administrative complexity that we face.

And as we celebrate our 170th birthday, we recall that Health2047 is named for the year in which we will celebrate our 200th anniversary. Lots of work to do before then.

Our work to tackle the threat of prescription opioids is challenging physicians, policymakers and others to devise comprehensive and lasting solutions for this scourge.

More than a dozen states in the last two years have introduced or passed AMA model legislation that expands access to the life-saving drug naloxone and/or implements Good Samaritan protections for those who intervene in treating overdose.

We worked with the medical associations of seven states to advance legislation on medical liability reform, securing victories to limit payouts, and strengthening standards for expert witnesses. This was important policy work to the field.

We partnered with societies to defeat problematic balance-billing legislation and introduce bills that incorporate fair payment standards ... including an important win in Nevada this past week.

Our Interstate Medical Licensure Compact now includes 21 states that, in the last three years, have significantly improved their state's licensing process.

Even these diverse initiatives across many states don't fully capture the entire scope of our partnerships – such as those with specialty societies. It's just there was no way to visualize that without producing a boring map in which all states were the same color!

Of course, our partnerships with all specialty societies are critical to our shared success.

Lastly, in addition to all the work that I've outlined, is something really big and incredibly important: our leadership effort on health reform.

Here we aim to ensure protections for millions who have gained coverage under the Affordable Care Act ... encourage lawmakers to view health care from the shoes of the patient ... encourage them, as our campaign states, ... to "put patients before politics".

Toward this end, we are working broadly with others ... working to promote a vision of our country's health system:

A vision that seeks to expand affordable and meaningful coverage ... a vision that protects safety net programs ... a vision that strengthens the individual insurance market ... and one that creates cost transparency.

We all have to acknowledge the challenging political environment we're working in. We're in truly uncharted waters.

Yet, we will push forward with ... mission, advocacy and leadership ... three words that have defined the AMA over these last 170 years.

No matter how health care evolves, we must remain grounded by the policies and principles that serve as our foundation ...

... and always remain true to our mission: "promoting the art and science of medicine and the betterment of public health."

And that goes double for Michigan!

Thank you.

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