



Bipartisan medical marijuana legislation: "Cannabidiol and Marihuana Research Expansion Act"

The "Cannabidiol and Marihuana Research Expansion Act" (S. 253), introduced by Senators Dianne Feinstein (D-CA), Charles Grassley (R-IA) and Brian Schatz (D-HI), would improve the process for conducting scientific and clinical research on cannabidiol (CBD) and marijuana, and streamline the development of safe and effective cannabinoid-based drugs approved by the U.S. Food and Drug Administration (FDA).

The American Medical Association believes that scientifically valid and well-controlled clinical trials conducted under federal investigational new drug applications are necessary to assess the safety and effectiveness of all new drugs, including potential cannabis products for medical use. Cannabis and its compounds, in particular CBD, have been found to have some therapeutic benefits. However, legal and regulatory barriers to cannabis and cannabinoid research have left physicians and patients without the evidence needed to understand the health effects of these products and make sound clinical decisions regarding their use. Our federal laws today are standing in the way of this needed research.

ASK: Urge your Senators to cosponsor S. 253, the "Cannabidiol and Marihuana Research Expansion Act" to enable medical marijuana research, and request that your Representative to introduce a companion bill in the House of Representatives.

Telehealth—Learning from the COVID-19 Pandemic

Telehealth services have emerged as a critical tool during the COVID-19 pandemic to provide care to patients while supporting physical distancing efforts and reducing the spread of SARS-CoV-2 and other infectious diseases by avoiding unnecessary outpatient visits.

The American Medical Association continues to hear success stories from patients and physicians who see the expansion of telehealth as a positive step for health care delivery due to increased convenience, better provider/patient communication, greater provider/patient trust, and access to real-time information related to a patient's social determinants of health (i.e., a patient's physical living environment, economic stability, or food insecurity)—all of which can lead to better health outcomes and reduced care costs. Congress should act to ensure that telehealth services are covered and remain available permanently at the end of the COVID-19 public health emergency.

Congress should permanently fix the geographic and site of service restrictions on audio-visual technologies: Under 1834(m) of the Social Security Act (SSA) (42 U.S.C. 1395m(m)), Medicare is prohibited from covering and paying for telehealth services delivered via two-way audio-visual technology unless it is provided at an eligible site in a rural area. Patients must also travel to an eligible originating site to receive telehealth services, except in a few instances where Congress has acted to authorize telehealth to the home for specific services. As a result, the 1834(m) restrictions essentially bar Medicare beneficiaries from using widely available two-way audio-visual technologies to access covered telehealth services unless they live in a rural area, and with a few exceptions, even those in rural areas must travel to an eligible health care site.

ASK: Ask your Senators and your Representative to consider supporting and co-sponsoring the Telehealth Modernization Act (S. 368/ H.R. 1332).

Combatting Maternal Mortality in the United States

The American Medical Association is committed to tackling the issues surrounding maternal mortality and morbidity head on. The U.S. has the highest maternal mortality rate among developed countries. Moreover, there is a large, and largely avoidable, racial disparity in maternal deaths: a 2019 report by the Centers for Disease Control and Prevention found that Black women are 3-4 times more likely to die from pregnancy-related causes than white women. This increasing rate of maternal mortality, which disproportionately harms our country's Black communities, is extremely concerning and exists at the intersection of racial and gender discrimination.

The AMA supports the "Mothers and Offspring Mortality and Morbidity Awareness (MOMMA's) Act," re-introduced by Rep. Robin Kelly (D-IL-2) and Senator Durbin (D-IL), which would improve data collection, disseminate information on effective interventions, and expand access to health care and social services for postpartum women. In addition, the bill would expand coverage for post-partum care for up to one year under Medicaid and CHIP, a top priority for the AMA.

ASK: Urge your Senators and your Representative to cosponsor the MOMMA's Act (S. 411 /H.R. 1350).