

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 257
(A-23)

Introduced by: Texas, Florida, Pennsylvania, American Academy of Dermatology, American Contact Dermatitis Society, American Society for Dermatologic Surgery Association, Arizona, California, Indiana, Mississippi, New Jersey, New York, Oklahoma, South Carolina

Subject: AMA Efforts on Medicare Payment Reform

Referred to: Reference Committee B

1 Whereas, State and federal advocacy is one of the main reasons physicians join the American
2 Medical Association and maintain membership in organized medicine; and
3

4 Whereas, Physicians have faced yearly reductions in the Medicare fee schedule while other
5 health care entities get increases and cost-of-living updates; and
6

7 Whereas, Medicare rates influence Medicare Advantage rates and private insurers' fee
8 schedules and profoundly affect payments to all modalities of medical practice; and
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10 Whereas, Medicine's past efforts have failed to correct these chronic financing issues; and
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12 Whereas, Our 2021 American Medical Association federal and state advocacy expenses were
13 only 5.5% of our AMA's total expenses¹; and
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15 Whereas, Our AMA net operating margin increased 345% from 2017 to 2021, and our AMA
16 reserves increased 52% to more than \$1 billion, but expenses for federal and state advocacy
17 decreased¹; and
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19 Whereas, The allocation and use of a greater percentage of AMA financial resources aimed at
20 our legislative and regulatory advocacy efforts will increase our chance of correcting a flawed
21 Medicare payment system; therefore be it
22

23 RESOLVED, That our American Medical Association declare Medicare physician payment
24 reform as both an urgent and a top advocacy and legislative priority for our AMA (New HOD
25 Policy); and be it further
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27 RESOLVED, That our AMA prioritize significant increases in funding for federal and state
28 advocacy budgets specifically to ensure Medicare physician payment reforms are achieved and
29 updated annually according to the Medicare Economic Index (Directive to Take Action); and be
30 it further
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32 RESOLVED, That our AMA use the increased federal and state advocacy funding to:
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- 34 1. Create and sustain a national media strategy and campaign promoting Medicare physician
35 payment reform;
- 36 2. Fund Washington, D.C., fly-ins, with a white coat march promoting Medicare physician
37 payment reform; and

3. Develop and implement any additional new strategies to accomplish this goal;
(Directive to Take Action); and be it further

RESOLVED, That our AMA consider this policy the top advocacy priority until this goal is accomplished (New HOD Policy); and be it further

RESOLVED, That our AMA make the next National Advocacy Conference sharply focused upon reforming the Medicare payment system to create a more sustainable payment formula for physician practices with annual updates according to the Medicare Economic Index (Directive to Take Action); and be it further

RESOLVED, That our AMA report back to the House of Delegates at each annual and interim session on the progress of our AMA staff and physicians until this goal is accomplished.
(Directive to Take Action)

Fiscal Note: \$1 million to \$8 million. AMA will implement the called for actions: Media and grassroots campaign, potential fly-in, providing reports, etc. Spend would be based on political opportunity and scaled appropriately, which is why a range is given for the fiscal note.

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REFERENCES

1. 2021 Annual Report: www.ama-assn.org/system/files/2021-ama-annual-report.pdf