Outgoing remarks to the AMA House of Delegates Annual Meeting 2023

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Dr. Speaker, Dr. Vice Speaker, Members of the Board, delegates, colleagues, and guests ...

It's my honor to be with you this evening.

I won't spend all of my final address to this House dwelling on the very real, very dangerous external attacks engulfing our profession.

You got to hear from "angry Jack" in November, when I channeled my deep frustration with anti-science aggression, disinformation, payment cuts, and the many practice burdens driving burnout, not to mention the growing number of states and courts forcing themselves into the most intimate and difficult conversations patients and physicians share.

All of us here today are leaders in medicine, representing physicians back home. And so, we carry the burden of these hardships for <u>them</u>, which makes us all acutely aware of how daunting these challenges feel to our colleagues on the frontlines.

I'm sure some of the headlines about burnout stop you in your tracks – they certainly keep me up at night.

One in five physicians plans to leave their practice within two years, while one in three is reducing hours.

Only <u>57 percent</u> of doctors today would choose medicine again if they were just starting their careers.

Consider that for a moment...

This means that about <u>two in five</u> physicians go beyond mere daydreams of another career to wishing they had never <u>chosen</u> this path in the first place.

This is a <u>stunning</u> indictment of the dysfunctional health care environment that is pushing record numbers of physicians to the brink.

In my inaugural address last year, and again at the Interim Meeting, I told the story of a Cleveland woman and casual runner who mistakenly ran the Cleveland marathon instead of the 10k she had signed up for.

Georgene Johnson's determination to finish the race, despite her lack of preparation, makes it an endearing story, and a perfect metaphor for <u>all of us</u> who pursued this profession to <u>heal</u> others ... only to find ourselves confronting a reality that is...

...unlike anything we imagined.

While Georgine's story never failed to get a laugh, I've thought a lot about where the metaphor may have missed the mark.

Lucky for Georgene, marathons have a defined end. You break the tape at the finish line, and you're done. *There is no more running to do*.

But in these difficult times for medicine in America, our work in organized medicine has <u>no finish line</u>.

New challenges keep appearing, and many existing ones seem to endure.

We are knocked down ... we dust ourselves off and get back up.

We accumulate victories – some small, some large ... but we keep running.

Don't bother looking for the rest areas between \underline{our} races – I can assure you... you won't find them.

But as physicians and healers, we are already very accustomed to persevering. And we're darn good at it.

We stick with patients suffering from chronic illnesses like diabetes or depression through setbacks and successes.

We keep trying to convince that longtime smoker to quit, schedule yet another appointment to talk with a hesitant family about vaccinating their child, and show up for yet another trauma shift to face an endless stream of gun violence victims.

We never turn our backs on our patients because that's NOT who we are.

And we carry that same stubborn resolve and tenacity into our advocacy work.

That means fighting for long overdue fixes to a broken Medicare payment system, and obnoxious prior auth abuses, even when policymakers have neglected the problems for decades.

That means defending against broad scope expansions that put patients at risk, even when it requires gearing up again and again, in state after state.

That means confronting medical disinformation in the news and on social media, even when its growth feels overwhelming.

And yes, it means battling in state legislatures and courthouses for the very <u>soul</u> of our nation and our profession – to protect patients from those outside influences wanting to <u>dictate</u> the terms of their care ...

...telling them what medical treatments their physicians can provide ...

...what FDA-approved medicines we can prescribe....

...even what words we can use ...

This is what happens when politicians force their way into our exam rooms.

This isn't about science.

Interfering with the sacred patient-doctor relationship is about CONTROL.

I know it can feel like victory is out of reach -- that we're running out of breath and running out of time....

But we all share a commitment to stay in this race ...

We play the long game, and we're in it to win.

So perhaps instead of the marathon analogy, it's better to think about our collective efforts like the Olympic torch relay.

Don't worry, I'm not heading for the obvious metaphor of a relay race, with one leader handing over the torch to the next.

I'm talking about the deeper symbolism of the unity among torch carriers, thousands at each Olympics protecting something far bigger than any one individual, or any one leg of the course.

In our own professional tradition, the work to preserve our core values, and the health of our patients, is <u>itself</u> ... **the enduring common cause that binds us**.

The torch relay and the lighting of the Olympic flame are indelible parts of the games.

And in that sacred tradition, as in ours, there are no shortcuts.

There are no substitutes for the actual flame, which is carried forward to the games by any means necessary – by running, jogging, or swimming; by horse, boat, train, or plane ... and once underwater past the Great Barrier Reef. The torch has even gone to space.

The passing of the torch, and the tradition it embodies, has survived <u>every</u> conceivable challenge.

It has been rerouted by war. Its symbolism has been coopted for propaganda. It's been briefly extinguished by wind, by rain, and even by protestors.

But one way or another, the tradition lives on.

I like this metaphor for our work together in organized medicine because it's not solely about passing a baton; it's about giving of <u>yourself</u> to a larger mission.

It's about persevering with unyielding resolve. The challenges that threaten the torch may change, but the larger mission does not.

The AMA doesn't win every battle. But we are more resolute in our work <u>because</u> of the threats to our profession and our patients.

Even when there are temporary setbacks, our common cause is to speak out for, and to advance *our* flame, *our* ethical values, and *our* common purpose - <u>that</u> is what keeps us going.

All of us here tonight...we recognize the extraordinary privilege to be part of something worth preserving and worth renewing for the next generation

That's the power in what we do.

I want to share some thoughts about where we are on this leg of the race, and some positive signs of hope.

No, I can't sugarcoat the very real threats.

I'm still appalled by the Medicare cuts. What on earth was Congress thinking? Practices are on the brink. Our workforce is at risk. Access to care stands in the balance.

We absolutely must tie future Medicare payments to inflation, and we're readying a major national campaign to finally achieve Congressional action.

<u>And shame</u> on political leaders, fueling fear and sowing division by making enemies of public health officials, of transgender adolescents, of physicians doing anti-racism work, and of women making personal decisions about their pregnancies.

I'm also deeply disappointed by our nation's lack of progress to address the public health crisis of gun violence. Preventable and needless homicides and suicides continue, and the political inaction is <u>atrocious</u>.

But over the past year, I've had the privilege of appearing in public on your behalf more

times than I can count. And that has afforded me many opportunities to absorb just where our profession, and the public, stand in this divisive time.

And I want to tell you something I've learned...

There are more people who agree with us than those who do not.

Are there different ideologies around solving the challenges we face?

Yes.

Are there different strategies for achieving our goals?

Of course.

Do people get their news from entirely different channels with little overlap?

Sadly, yes.

<u>But...the truth is</u>, most physicians and our patients are proud to see the AMA fighting for its policies and values.

I know what you are thinking...

"Jack, have you been on Twitter lately?"

Oh yes...I have.

But I've also witnessed some of the most inspiring work in the country by colleagues and allies, and received words of encouragement that have brought me to tears on difficult days.

You wouldn't know it from social media...

But after some unfortunate detours, most patients are turning back to their trusted physicians for our insights and expertise about science and medicine.

You wouldn't know it from the rhetoric ...

But once we demonstrate health equity in action...I've seen widespread support for the work.

I loved traveling to Mississippi and witnessing their progress from startling COVID inequities to achieving one of the nation's top vaccination rates among Black residents.

You wouldn't know it from the appalling lack of legislative action ...

But solid majorities of Americans believe in commonsense gun reforms in line with our AMA recommendations.

You wouldn't know it from 20 state legislatures racing to criminalize abortion and rob women of access to reproductive health care...

But most people in this country support our policies and the fundamental rights of patients to make their *own* decisions about their health.

You wouldn't know it from health insurers still bullying us with prior auth delays and denying care ...

But policymakers from both parties are onto these schemes, the momentum has shifted, and they're not going to allow this <u>nonsense</u> anymore.

You may not realize it, based on the climate of anti-science aggression...

But medical school applications are at an all-time high, led by large increases among historically minoritized students.

Future physicians are not dissuaded by these challenges. They are eager to join our fight.

In our country, and in our profession, we don't agree on everything, but we agree on enough things to pursue the <u>shared things</u> that we care about. <u>Together</u>.

And let us not forget that those pursuits have generated some big and small wins tied to the AMA Recovery Plan for America's Physicians.

I know what you're thinking. Recovery Plan? What's that? I've never heard of it before.

I know, I know... your hundredth exposure to the video loop on our buses at Interim may have been overkill.

But for the public and physicians back home, they need to know about our relentless work fighting to restore the sustainability of our profession. In *that* race, the Recovery Plan is our roadmap and our message.

As I said in November, we need to fix what's broken in health care, and it's NOT the doctor.

Duct-taping the widening cracks of a dilapidated Medicare payment system isn't sustainable. The patches aren't holding.

Linking physician payment to inflation is an absolute top priority, an **existential** <u>must</u> to keep practices afloat, and pillar #1 of our plan.

An important step on that path was the recent introduction of a bipartisan bill to <u>finally</u> align the Medicare fee schedule with MEI.

On other pillars, our Congressional advocacy played a key role in legislation to extend Medicare telehealth coverage.

In partnership with states and specialties, our advocacy has helped protect patients from outrageous and broad scope expansions more than 50 times so far this year.

State after state is making progress to constrain prior authorization, and CMS issued rules to do the same in Medicare Advantage plans.

And we have been instrumental in helping create confidential wellness programs for physicians and removing outdated questions from past impairment from licensing and credentialing forms.

And the AMA is achieving success on the breadth of policies from this House beyond our Recovery Plan as well.

The FDA is making Naloxone available over the counter ... and may be on the verge of doing the same for an over-the-counter oral contraceptive.

The FDA has also finally removed many outdated restrictions on blood donations from men who have sex with men.

Medicaid work requirements that conflict with AMA policy were kept out of the debt ceiling bill.

We've helped shift the national conversation about protecting patient data and making sure digital health and AI tools are proven BEFORE being deployed.

We've broadened and intensified our work to embed equity and racial justice, and to push upstream to affect structural and social drivers of health inequities.

And our litigation center has been very, very busy.

We've joined others in suing Cigna for shortchanging doctors and patients.

We forced the federal government to take steps towards banning menthol cigarettes.

The Wisconsin Supreme Court agreed with us that patients and judges can't <u>force</u> physicians to administer substandard care.

Courts have invalidated parts of No Surprises Act rules that plainly ignored Congressional intent and put a thumb on the scale to favor insurance companies... thank you Texas Medical Association and AMA!

The 5^{th} Circuit Court is staying- for now – an egregious ruling that would have stripped patients of the right to access preventive care service with no out-of-pocket costs, a key piece of the Affordable Care Act.

The U.S. Supreme Court is delaying attempts by a single district judge with no scientific or medical training to take mifepristone off the market nationally and upend our entire FDA drug regulatory process.

We're briefing in more courts than I can count to turn back criminalization of medical care.

And we're not done yet.

Not even close.

In my inaugural address, I admitted to being a pragmatic optimist who believes in relentlessly showing up and using levers of power to help create a more just and equitable system.

I remain undeterred – even though the challenges we face today are daunting.

The burnout and the moral injury are real ... I've felt it myself.

I hear this concern in the voices of medical students, residents, and even young physicians when they ask me ...

"Am I going to be okay?"

"Have I made the right career choice?"

The first message I share: Yes, I'm confident that you have made the right choice.

You are joining an extraordinary profession, and we are lucky to have you.

Don't ever lose your passion for humanity and healing.

And the second message I give them ... there is no time to waste, so let's get to work. *"You want a more equitable future for patients?"*

Demand it.

"You want a future where our health care system and new technologies support

physicians rather than burdening us?"

Create it.

"You want patients making their own decisions about their health?

Fight for it.

You are entering the profession for all the right reasons and to fix all the right problems ... and there will be more.

We have enormous <u>privilege</u> to do this work.

We share a love for what we do – to help...to cure...to listen...to solve...to heal...to lead.

And we have a **responsibility** to our patients AND to the health of this nation.

WE are the keepers of an important tradition ... a flame that must NOT be extinguished.

Our profession is counting on us to get this right.

Our patients are depending on us to continue...this...fight.

We will not let them down.

Thank you.

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