



# AMA ADVOCACY IMPACT REPORT

FEBRUARY 2026



## LETTER FROM THE CEO

To our physician community, colleagues and partners,

Health care is at a defining moment—a moment that demands clarity of purpose, steady physician leadership and an unwavering commitment to patients. At this pivotal juncture, the American Medical Association is ensuring that physicians' voices are heard on Capitol Hill and driving decisions that will shape the future of medicine.

This report reflects the breadth of the AMA's national advocacy efforts in 2025 and underscores a fundamental belief that when *physicians and organized medicine advocate for a better health care system, everyone benefits.*

From protecting access to care and reforming Medicare payment to driving technology and strengthening public health, our work is grounded in the responsibility to build a health system that is more effective, sustainable and centered on those we serve.

The challenges facing physicians and patients today are complex and deeply interconnected. Solving them requires leadership informed by clinical experience, scientific rigor and a clear commitment to patients' needs. That is why the AMA brings physicians directly to Capitol Hill to meet with lawmakers, share their expertise and advocate for solutions that reflect real-world medicine.

Thank you for your dedication to your patients, your communities and the profession. Together, we will continue to shape a healthier future for all.

Sincerely,

**John Whyte, MD, MPH**

CEO and Executive Vice President

American Medical Association

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## AMA ADVOCACY BY THE NUMBERS



**1000s** of interactions with Congressional offices



**210** letters and written testimony delivered



**100s** of resources developed



**700** average registrants for Advocacy Insights webinars



**100s** of physicians advocated on Capitol Hill during the AMA National Advocacy Conference



**131,312,000** impressions, **106,063** contacts to Congress and **7,162,500+** digital media engagements through the AMA Patients Action Network and AMA Physicians Grassroots Network

## A MAJOR WIN TO START THE YEAR

In February, H.R. 7148, the Consolidated Appropriations Act of 2026, was signed into law. A part of this legislation was funding for the Department of Health and Human Services, which included a number of policy wins that were the result of years of sustained AMA advocacy. A few of these wins include:

### Extending Medicare telehealth coverage

Medicare telehealth flexibilities have been extended for two years through Dec. 3, 2027. The AMA strongly supported this extension and continues to advocate for permanent authorization.

### Restoring an APM bonus for physicians

Alternative payment model (APM) incentive payments have been reinstated at 3.1% for the 2026 performance year/2028 payment year.

### Expanding the Medicare Diabetes Prevention Program (MDPP)

For the first time CDC-recognized virtual diabetes prevention programs will be included in the MDPP expanded model on a trial basis from Jan. 1, 2026, to Dec. 31, 2029, which addresses longstanding access barriers in rural and underserved communities.

### Reforming Medicare Advantage provider directories

Medicare Advantage plans must maintain accurate, regularly updated provider directories and publicly report accuracy rates. CMS oversight, Government Accountability Office evaluation, public reporting and dedicated funding also strengthen accountability and enforcement.

### Extending the Acute Hospital Care at Home (AHCAH) waiver

This five-year extension of the AHCAH waiver through 2030 preserves a proven, physician-led model that delivers hospital-level care safely in the home, with strong outcomes and high patient satisfaction.

### Expanding the Dr. Lorna Breen Health Care Provider Protection Act

As part of this five-year extension through 2030, this legislation continues funding, mandates annual stigma-reduction campaigns, broadens grant eligibility to address administrative burdens and aligns grant periods with the authorization length.

### Introducing pharmacy benefit manager reforms

These reforms enhance transparency, curb abusive Medicare drug rebate practices and strengthen enforcement against anti-competitive behavior. They represent tangible progress toward lowering prescription drug costs and improving fairness in the drug supply chain.

### Strengthening support for maternal health

This legislation includes the PREEMIE Reauthorization Act, which expands federal research on preterm birth and efforts to improve outcomes for premature infants. It also reauthorizes the Preventing Maternal Deaths Act, which increases authorized funding, expands the scope of state maternal mortality review committees and directs federal agencies to more regularly disseminate best practices.

# REFORMING MEDICARE PAYMENT

The ever-increasing gap between what Medicare pays physicians and what it costs to provide care is making it nearly impossible for physician practices to make ends meet.

When adjusted for inflation in practice costs, payment rates have declined 33% over the last 20 years.

Severe repercussions for patient access and quality of care hang in the balance. Thanks to an unrelenting, multipronged effort from the AMA and our partners, policymakers are increasingly aware of this crisis and working toward permanent payment system solutions.



## A COMPREHENSIVE CAMPAIGN TO FIX MEDICARE NOW

In 2025 we empowered more physicians and patients than ever before to contact policymakers and urged them to take action through our “Fix Medicare Now” campaign.



**910,600+**

FixMedicareNow.org  
site visitors



**1,060+**

#FixMedicareNow  
mentions on social media



**103,845,600+**

paid media impressions



**100,026**

contacts to Congress

**36%**

increase in visitors to  
FixMedicareNow.org



Visit [FixMedicareNow.org](https://FixMedicareNow.org)

## MOMENTUM IS BUILDING

- In its June 2025 report to Congress, **MedPAC echoed the AMA's concerns** that the growing gap between the cost of delivering care and the reimbursement provided by Medicare could threaten patients' access to care.
- That same month, **the Medicare Trustees also echoed these concerns** and projected that if physician payment does not change, access to Medicare-participating physicians will become a significant issue in the long term.
- In an effort to stabilize practices and preserve patient access, **Congress provided a one-time 2.5% Medicare payment update** for 2026 in the One Big Beautiful Bill Act (H.R. 1).
- For 2027, **MedPAC voted to recommend an additional 0.5% update on top of the updates** specified in current law—0.25% and 0.75%—and will forward that recommendation to Congress.



This larger gap between input-cost and payment-rate growth could create incentives for clinicians to reduce the number of Medicare beneficiaries they treat, stop participating in Medicare entirely or vertically consolidate with hospitals, which could increase spending for beneficiaries and the Medicare program.

MEDPAC

June 2025 Report to the Congress:  
Medicare and the Health Care Delivery System

# PROTECTING ACCESS TO CARE

The One Big Beautiful Bill Act (OBBBA) introduced sweeping funding cuts and policy changes to Medicaid, the Health Insurance Marketplace®, Medicare physician payment and medical student loans. These changes will have a significant impact on physicians and their patients' access to care.

Harmful provisions in the OBBBA:

- Substantial funding cuts to state Medicaid programs
- Work requirements for enrollees in Medicaid expansion programs
- More frequent eligibility checks in Medicaid
- Stricter verification, plus increased premiums and out-of-pocket costs for people with Affordable Care Act marketplace coverage

# 15 MILLION INDIVIDUALS COULD LOSE HEALTH INSURANCE

and access to critical services due to the OBBBA and related Affordable Care Act policies.

## RALLYING TOGETHER TO SUPPORT PATIENTS

Throughout the OBBBA debate, the AMA was vocal about the potential harms to patients. Now, we are working on multiple fronts to protect patient access to affordable coverage and ensure that states and advocates have the resources they need to help limit the law's impact by:

- **Continuing to press federal agencies** to prioritize patient access in implementing regulations
- **Convening state and specialty medical societies** to share information, strategize, and strengthen advocacy in every state to lessen the negative impact on Medicaid and marketplace enrollees and physician practices
- **Creating and sharing advocacy tools**, including issue briefs, detailed legislative and regulatory summaries, and other resources addressing the impending funding cuts and policy changes to help physician advocates develop strategies to prevent coverage losses
- **Providing resources, presentations and webinars** to help physicians understand the impact of the changes on their patients and highlight opportunities to prevent coverage losses

## WHEN ACCESS TO CARE IS THREATENED, THE AMA RESPONDS

Shortly after the OBBBA became law, another challenge emerged. More than 2,000 recipients of grants from the U.S. Substance Abuse and Mental Health Services Administration were notified that their grants had been terminated.

The AMA quickly called for the grants to be restored, explaining that "These programs help physicians and communities provide lifesaving, evidence-based care, and losing this funding would make it harder for patients to access critical services such as medications for opioid use disorder, naloxone and mental health treatment, especially in rural and underserved areas."

Thanks to the AMA's advocacy and a groundswell of grassroots activity across the country, less than two days later, grant recipients began receiving emails telling them to "disregard the prior termination notice and continue program activities as outlined in your award agreement."



# FIXING PRIOR AUTHORIZATION

Creating a barrier between patients and necessary care under the guise of controlling costs, prior authorization has become an overused, dangerous tactic that has woven its way into everyday medicine.

It is causing serious patient harm—not to mention increased physician burnout. This isn't just a game of paperwork—patient lives are on the line.

Every year, the AMA conducts a survey of physicians about prior authorization to show the extent of the problem. Last year, the survey results were downloaded more than 100,000 times and cited in numerous media outlets. These findings reinforced the urgent need for reform.



**More than 1 in 4 physicians** say prior authorization has led to a serious adverse event for a patient in their care.



Physicians and their staff **spend 13 hours each week** completing prior authorizations.

## A CLARION CALL FOR CHANGE

In 2025 our successful grassroots campaign to #FixPriorAuth continued. These tremendous efforts, combined with the AMA's constant advocacy at federal and state levels and collaboration with partners across the country, have powered a multi-pronged approach that drives change.



**76,500+**  
FixPriorAuth.org  
site visitors



**1,000+**  
#FixPriorAuth  
mentions on social media



**5,329,400+**  
paid media impressions



**1,125,500+**  
paid social media reach



**23 states**  
passed legislation to reform prior  
authorization in 2025

## WIDESPREAD AWARENESS INSPIRES NATIONWIDE ACTION

### Congress recognizes the problem

- The House and Senate reintroduced the Improving Seniors' Timely Access to Care Act of 2025 (H.R. 3514/S. 1816), which improves transparency and reduces unnecessary delays in patient care by facilitating the expansion of electronic prior authorization in Medicare Advantage.
- The House introduced the bipartisan Patient Access to Autoimmune Treatments Act (H.R. 5467), which helps to reduce administrative burdens on patients dealing with chronic diseases and their physicians.

### Insurers pledge to act

- AHIP and the Blue Cross Blue Shield Association announced that over 60 of their member plans would improve prior authorization by:
  - Reducing the overall volume of requirements
  - Offering a standardized electronic process that integrates with EHRs and enables real-time decisions
  - Improving continuity of care and enhancing transparency



**Learn about the AMA's efforts** to fix prior authorization at the state level in the AMA State Advocacy Impact Report.

# SHAPING AUGMENTED INTELLIGENCE IN MEDICINE

It is clear that augmented intelligence (AI) will have a profound impact on medicine. Federal and state lawmakers are rapidly responding to help AI reach its potential while addressing its challenges.

Physicians must play a leading role in these discussions to ensure AI is an asset to them and their patients—and not a burden. Physicians are excited about the possibilities of AI, and the AMA is working to ensure their unique perspective drives the development of this transformative technology.



## LAUNCHING THE AMA CENTER FOR DIGITAL HEALTH AND AI

In 2025 the AMA launched its Center for Digital Health and AI to take the lead in this space. The new center puts physicians at the forefront of shaping, guiding and implementing technologies transforming medicine. Through its work, the center will tap the full potential of AI and digital health and focus on four strategic areas:



### Policy and regulation

Shape how the profession governs AI responsibly and ethically



### Clinical workflow

Ensure AI tools are designed to solve real problems



### Education and training

Equip clinicians to use AI and create feedback loops to improve it



### Collaboration

Partner to drive innovation aligned with patient needs



**Learn more** about the AMA Center for Digital Health and AI.

## WHEREVER AI POLICY IS MADE, THE AMA WILL BE THERE

At the federal level, AMA advocacy is focused on three key areas.

- Continuing to engage with Congress and the executive branch on AI issues currently on the agenda
- Preparing to increase advocacy around regulations of AI chatbots and issues of deepfakes of physicians
- Escalating our continued push for transparency requirements for AI technologies, updated data privacy and cybersecurity protections, oversight on payer use of AI for claims determinations, and addressing issues of accountability and liability

At the state level, we anticipate this year will see even more interest in AI legislation, building on the wide range of bills that were passed in 2025.



**The AMA ensures that our conversations about emerging state health policy innovations include the physician perspective and the real-life impact of policy on patient care.**

**TIM STOREY, CEO**

National Conference of State Legislatures



**Learn more** in the AMA State Advocacy Impact Report.

# STANDING UP FOR SCIENCE

Last year saw a sharp increase in attacks on science and near-constant change and uncertainty in public health policy, particularly at the federal level.

Throughout it all, the AMA continued to stand up for science and evidence-based decision-making. One issue that needed the trusted voice of physicians more than ever was vaccines.

The sweeping changes to the Advisory Committee on Immunization Practices, a series of measles outbreaks, and much more upended years of progress and public trust. Now, the recent changes to the childhood immunization schedule have created new concerns for the health and safety of millions of children.

Vaccination policy has long been guided by a rigorous, transparent scientific process grounded in decades of evidence showing that vaccines are safe, effective and lifesaving. Patients should be able to rely on public health institutions for clear, evidence-based guidance when making important vaccination decisions. In 2025, the AMA was one source upon which they could always rely.

## SPEAKING OUT WHERE IT MATTERS

Wherever patients happen to see information about vaccines, the AMA was there: in the news, on social media and in internet search results. We elevated experts and echoed the evidence-based recommendations that patients expect to hear from their physicians.



**Our goal is to cut through misleading information, facilitate informed conversations between patients and physicians and build trust.**

**BOBBY MUKKAMALA, MD**  
President, AMA



**The scientific evidence remains unchanged, and the AMA supports continued access to childhood immunizations recommended by national medical specialty societies. We urge federal health leaders to recommit to a transparent, evidence-based process that puts children's health and safety first and reflects the realities of our nation's disease burden.**

**SANDRA ADAMSON FRYHOFER, MD**  
Member, AMA Board of Trustees

## WHEN WE TAKE A STAND, PEOPLE TAKE NOTICE

**AMA Calls for ACIP Answers, Stable Federal Funding**

—Medscape

**American Medical Association trustee denounces CDC panel's vaccine vote as 'reckless'**

—The Hill

**US cuts the number of vaccines recommended for every child, a move slammed by physicians**

—Associated Press News

**Dozens of medical groups denounce CDC's new statements on vaccines and autism**

—Chief Healthcare Executive

**AMA president warns against preventive services task force cuts**

—PBS Newshour

**As new variant spreads, what's the latest COVID-19 vaccine guidance? It's complicated**

—USA Today

**The AMA Doesn't Put Politics Ahead of Science**

—The Wall Street Journal

# FOOD IS MEDICINE

Uniform, comprehensive and evidence-based information about nutrition is crucial in helping Americans make positive food choices. This information should advance public health and be developed without conflict of interest or food industry influence.

Earlier this year, when the administration released the new Dietary Guidelines, the AMA drew attention to the changes that would lead to better patient health.



**The Guidelines affirm that food is medicine and offer clear direction patients and physicians can use to improve health.**

**BOBBY MUKKAMALA, MD**  
President, AMA

## OUR COMMITMENT TO LASTING NUTRITION CHANGE

Following the release of the new Dietary Guidelines, the AMA announced that we are making significant commitments to improve clinical competency, deliver educational resources for physicians, and work with Congress to enact meaningful, lasting nutrition change that can improve lives. We are:

- **Launching a collection of nutrition education resources** and CME on the AMA Ed Hub™. Additionally, the AMA will curate educational resources available through institutional curriculum products specifically for medical students, residents and fellows, and physicians.
- **Convening a series of roundtables** with physicians, nutrition experts, and public health leaders to strengthen nutrition education and clinical competency. These efforts—driven by the new Dietary Guidelines—should also make it easier for physicians to talk to patients about the role of food in preventing, and even treating, chronic disease.
- **Working with Congress** to incentivize nutrient-dense foods, expand food labeling efforts, define ultra-processed foods and increase investment in nutrition research.



# SHAPING MEDICINE'S FUTURE THROUGH THOUGHT LEADERSHIP

Physicians must be architects of change in medicine. To do that, they need to not just be involved in conversations about the future of care—they need to be driving them. The AMA's original reports, research, trusted analyses and resources help physicians stay informed and prepared to do exactly that.

Our thought leadership also shapes our policy perspectives, strengthens our advocacy and cements the AMA as the definitive voice of medicine and an authoritative resource for policymakers, journalists and academic institutions.



Stay up to date on the AMA's research by following us on LinkedIn.

## AMA RESEARCH AND REPORTS

In the last year, the AMA published a wide range of research that shared new insights on some of the biggest trends in health care and solutions to some of today's most pressing problems.

- **Physician Practice Benchmark Survey:** one of the AMA's most significant undertakings, this original research looks at physicians' practice arrangements and payment methodologies
- **Competition in health care research:** independent research on competition, vertical integration, and market power in markets for health insurance and other health care sectors
- **Medical liability market research:** original research that examines medical liability premium trends
- **Trends in health care spending:** an in-depth analysis based on the U.S. National Health Expenditures data released by the Centers for Medicare & Medicaid Services



## PERSPECTIVES THAT DRIVE HEADLINES AND SPARK CHANGE

**Share of Physicians in Private Practice Continues to Slide, AMA Reports**

—Medscape

**Competition Remains Elusive in Private Insurance Market**

—Medscape

**Health Insurers Vow—Again—to Fix Prior Authorization Process. Here's What to Know**

—TIME

## DRIVING POLICY CHANGE IN EVERY STATE

Through partnerships with national, state and specialty medical societies, we work to enact state laws and regulations that protect patients and support physicians. Our physician-centered advocacy helps policymakers understand the harm caused by inappropriate scope expansions, the urgent need to reduce physician burnout and much more.



See how we turn insights into action in the AMA State Advocacy Impact Report.

