AMERICAN MEDICAL ASSOCIATION PRIVATE PRACTICE PHYSICIANS SECTION

Resolution: 5
(I-26)

Introduced by: Michael Brisman, MD

Subject: Payment Transparency to Non-Profit Healthcare Entities

Referred to: PPPS Reference Committee
(, MD, Chair)

Whereas, a major driver of reduced physician influence and increased healthcare costs are price fixing maneuvers by non-profit hospitals and giant insurance companies, in particular the payment amounts for physicians and facility fees; and

Whereas, non-profit hospitals and giant insurers are able to artificially make physician rates look much smaller by bundling them in with their astronomical facility fees, which in turn make it impossible for physicians to work independently of hospitals or insurance companies; and

Whereas, non-profit hospitals are all effectively funded by the public, with tax-free status, allegedly for the benefit of the public; and

Whereas, it would clearly be in the public interest for everyone to better understand the payments that non-profit hospitals are being paid for their physicians and their facilities for given services; therefore be it

RESOLVED, that our American Medical Association will advocate for a federal law that requires non-profit hospitals and insurers to post on public websites information about all insurer payments for physician fees and facility fees to non-profit hospitals (Directive to Take Action).

Fiscal Note: (Assigned by HOD)

Received: 8/3/2026

RELEVANT AMA POLICY

Mandating Health Insurers to Provide a Real-Time Online Tool for Coverage and Payment Policies, Integrated into Electronic Health Records (EHRs) H-478.972

1. Our American Medical Association will advocate for legislation or regulations requiring all health insurers in every State to provide a real-time online tool for physicians and patients to determine coverage and payment policies for medical procedures, treatments, and services at the time of suggested procedures.
2. Our AMA advocates that the online payment policy tool must include detailed, accurate, and up-to-date information regarding covered services, co-pays, deductibles, and payment policies for specific procedures, and that insurers honor the coverage and payment determination provided at the time of approval.
3. Our AMA advocates that the online payment policy tool must be a uniform interface that works across all insurers and physicians, ensuring consistent and streamlined access to coverage information for physicians and patients.

Citation: Res. 815, I-25

Published Reimbursement Schedules by Private Insurers D-385.976

Our AMA will request that all state insurance regulators require all private insurers to make available to each participating physician practice their updated payment schedules on an annual basis, and interim updates to the payment schedule should be provided to contracted physicians at least 90 days prior to the effective date.

Citation: Res. 805, I-04; Reaffirmed: A-09; Reaffirmed: CMS Rep. 01, A-19