



### Family Physicians Kick Off 2024 On Capitol Hill



**Why it matters:** Family physicians are trusted leaders in their communities and valued constituents. Their perspectives on key policy issues are important for members of Congress to consider as they advance health care legislation.

This week, AAFP President Steven P. Furr, M.D., FAAFP; AAFP Board Chair Tochi Iroku-Malize, M.D., M.P.H., FAAFP; and AAFP President-elect Jen Brull, M.D., FAAFP, spent time on Capitol Hill engaging with lawmakers about three key issues for family physicians: reauthorizing the Teaching Health Center Graduate Medical Education program, enacting Medicare physician payment reform, and ensuring that family physicians can continue to provide necessary substance use disorder care.

**What we're working on**

- The AAFP continues to advocate for reauthorization of the THCGME program, which helps train the next generation of primary care physicians and address the physician shortage. The THCGME program has trained thousands of primary care physicians and dentists, 61% of whom are family physicians. Amid a growing workforce shortage, it is imperative that Congress reauthorizes this vital program.
- Family physicians deeply appreciate, and are already using, the G2211 add-on code, which more appropriately values primary care services. However, a [Medicare payment reduction](#) of 3.4% still threatens all physicians with untenable cuts.
  - That's why our members [asked Congress](#) to pass legislation that stops the full 3.4% cuts.
  - We are also advocating for reforms to existing budget neutrality requirements, which undermine positive policy changes and hamstring CMS' ability to appropriately pay for all the services a beneficiary needs.
- Family physicians provide comprehensive mental and behavioral health services every day. They play a crucial role in safe pain management prescribing practices, screening patients for opioid use disorder (OUD), and prescribing and maintaining treatment of medications for OUD. AAFP leaders expressed strong [support for legislation](#) that ensures trained family physicians can continue to provide necessary care, including substance use disorder treatment.

### **AAFP Calls on Congress to Pass Legislation to Support Primary Care**



**Why it matters:** The AAFP strongly urges Congress to enact health care policies that will meaningfully invest in primary care, including bolstering the primary care physician workforce, improving Medicare physician payment, and promoting access to necessary substance use disorder care.

**What we're working on**

- The AAFP is [advocating to advance several proposals will improve access to care](#), including the following.
  - Supporting legislation that increases the statutorily provided relief from Medicare physician payment cuts for 2024.
  - Encouraging passage of [the bipartisan Lower Costs, More Transparency Act](#), which would reauthorize the Teaching Health Center Graduate Medical Education program for an unprecedented seven years, reauthorize the National Health Service Corps, and help fund community health centers.
  - Addressing payment differences across sites of care for physician drug administration services and implementing billing and price transparency provisions that will help stem consolidation and allow patients to make informed care decisions.
  - [Ensuring](#) that family physicians can continue to provide necessary, uninterrupted care to their patients, including substance use disorder treatment.

### **Family Physicians Aim to Build on Advocacy Wins in 2024**



***Why it matters:*** Family physicians spent a lot of time in 2023 advocating for policies and regulations that would improve patient care. The AAFP applauds Congress and health care agencies for implementing changes to strengthen access to care and ensure that physicians have the tools and resources they need to continue providing high-quality, longitudinal primary care to patients.

#### ***What we're working on***

A few of the changes in 2024 that made a positive difference for family physicians and their patients include the following.

- The implementation of the G2211 Medicare add-on code that began on Jan. 1, which more appropriately values the complex, continuous services they provide.
- New Medicare codes in 2024 that will better assess patients' unmet social needs and integrate community-based services to address those needs. This supports the foundation of family medicine: comprehensive, person-centered primary care.
- The requirement for states to provide one-year continuous coverage for children enrolled in Medicaid/CHIP, which began Jan. 1. The AAFP strongly [supported](#) this provision and continues to advocate strongly in favor of expanding continuous coverage requirements to other beneficiaries.
- Provisions enacted in the Inflation Reduction Act that will make prescription drugs more affordable for Medicare patients.
- Additional Medicare payment for at-home vaccination for patients with certain [conditions and/or limitations](#) that prevent them from being vaccinated at their primary care physician's office.
- New guardrails and transparency requirements on Medicare Advantage plans' use of prior authorization, reducing care delays and inappropriate coverage denials.

### **New Regulations to Streamline Prior Authorization Signal Win for Family Medicine**

“Electronic prior authorization will help cut down on the time physicians spend requesting and appealing coverage authorization from plans, as well as provide patients with more visibility into their care. However, policymakers must also address the overwhelming volume of prior authorizations that physicians must complete.”

– Steven P. Furr, MD, FAAFP  
President, American Academy of Family Physicians



**Why it matters:** The Centers for Medicare and Medicaid Services announced a final rule to automate prior authorizations and require several payers to respond to prior authorization requests within 72 hours for urgent requests and seven days for non-urgent requests.

According to the American Medical Association, 93% of physicians report care delays for patients whose treatment requires prior authorization, and 82% of physicians report that prior authorization can sometimes lead to a patient abandoning treatment.

The AAFP has long advocated for policies to alleviate administrative burden, avert care delays, and allow physicians to spend more time treating their patients.

### ***What we're working on***

- AAFP President Steven Furr, M.D., FAAFP, [issued a statement applauding CMS](#) for finalizing new regulations to streamline and automate prior authorization processes across payers. This marks significant progress to address care delays and the administrative burden physicians face daily.
- Comprehensive reform is needed to reduce the volume of prior authorizations and ensure patients' timely access to care. The AAFP [continues to advocate](#) for Congress to swiftly pass the Improving Seniors' Timely Access to Care Act, which will streamline and standardize prior authorization under the Medicare Advantage program and protect beneficiaries from unnecessary delays in care.

### **Proposed Information Blocking Disincentives for Clinicians Concern Family Physicians**



***Why it matters:*** A new Office of the National Coordinator for Health IT, CMS, and U.S. Department of Health and Human Services proposed rule could unfairly penalize and disproportionately impact small and independent primary care physician practices. The AAFP has long supported efforts to advance interoperability of health IT.

Interoperability allows the timely and secure access, exchange, and use of electronic health information so that data can be leveraged to optimize patient and population outcomes. Interoperability is essential for ensuring family physicians have access to meaningful, actionable data at the point of care, which enables them to provide high-quality, patient-centered care across the lifespan.

### ***What we're working on***

- The AAFP [submitted comments](#) urging HHS to work with physicians to correct information-blocking issues before issuing penalties.

- Family physicians encourage ONC, CMS, and HHS to ensure that the final rule effectively promotes information sharing and does not negatively impact patients' access to high-quality primary care.

## **CMMI and Value-based Care Have Played Important Roles in Advancing and Safeguarding Primary Care**

Historic underinvestment in primary care jeopardizes the nation's health. The only way to address this threat is to overhaul our system for financing primary care and move toward a [system that is designed to support high-quality primary care](#), write AAFP EVP and CEO R. Shawn Martin and Aledade CEO Farzad Mostashari in [Health Affairs](#).

Over the past decade, we've seen more primary care practices move into alternative payment models that help them care for their patients. The best part is that it's working: Primary care practices in these new models are improving quality, producing savings, and investing in new care delivery strategies that improve patient outcomes and physician satisfaction.

We attribute much of this progress to the combination of the Center for Medicare and Medicaid Innovation and the permanent Medicare Shared Savings Program. [Read the full piece here](#).

Martin will also [participate in Health Care Value Week](#) and will discuss the vital role primary care plays in underserved communities during a webinar next week.

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## **What We're Reading**

- AAFP President Dr. Steven Furr [was interviewed by PBS](#) on vaccine misinformation and how family physicians can help encourage Americans to get vaccinated.
- R. Shawn Martin, the AAFP's EVP and CEO, spoke with [STAT News](#) on the state of primary care and key solutions to invest in primary care and bolster the family medicine workforce.
- Family physicians play a critical role in providing obstetric care in rural and underserved communities. "Family doctors, who also provide the full spectrum of primary care services, are the backbone of rural deliveries," said Julie Wood, M.D., M.P.H, FAAFP, senior vice president of research, science, and health of the public at the AAFP, on [NPR](#).
- Data from the CDC indicate that suicide levels are rising in the U.S., hitting a new record in 2022. AAFP Board Member Teresa Lovins, M.D., FAAFP, told [Healio](#): "The mental health crisis in the U.S. is alarming.... One of the reasons why ... is because it is preventable."

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