



Welcome to Family Medicine Advocacy Rounds—the American Academy of Family Physicians' monthly tip sheet to educate, engage, and update you on the latest policy issues affecting family physicians and their patients.

### **Family Medicine Advocates Visit Capitol Hill**



**Why it matters:** Nearly 300 family physicians, residents, and medical students traveled to Washington, D.C., for the AAFP's Family Medicine Advocacy Summit. As part of the summit, they met with policymakers to discuss urgent health care issues affecting patients and practices. [Health Resources and Services Administration Administrator Carole Johnson](#) gave the keynote address.

**What we're working on:**

- Family physicians spent a day on Capitol Hill asking Congress to help address the burden of student loan debt by passing the Resident Education Deferred Interest (REDI) Act, introduce legislation that would require Part B coverage of all ACIP-recommended vaccines, and pass the Primary and Virtual Care Affordability Act.
- AAFP EVP and CEO Shawn Martin [wrote a Medical Economics op-ed in support of the Primary and Virtual Care Affordability Act](#), which will allow insurance plans and employers to provide coverage for primary care services to individuals enrolled in high-deductible health plans before they reach their deductible. This legislation will help protect patients from increasing health care costs by addressing one of the existing financial barriers to accessing primary care.
- Family physicians urged policymakers to pass the [REDI Act](#), which allows medical residents to defer their federal student loan interest during their residency. This will save physicians a significant amount of money in interest they would otherwise accrue and have to pay back.
- To keep our seniors healthy, family physicians asked Congress to eliminate confusion and barriers to access by [ensuring all ACIP-recommended vaccines are covered by Medicare Part B](#), including the RSV vaccine. This would allow beneficiaries to readily access vaccines wherever it's most convenient – including from their usual, trusted source of care such as their family physician – and help improve vaccination rates.

### **Family Physicians Support FTC Rule to Ban Noncompetes and Identify Opportunities to Improve Competition in Health Care**

“The AAFP is pleased to see the Federal Trade Commission take concrete action to ban noncompete clauses in employee contracts. This decision puts patients first and ensures family physicians can pursue opportunities that value their expertise and continue to provide high-quality care that their communities need.”

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



**Why it matters:** The Federal Trade Commission (FTC) [issued a final rule](#) to promote competition by banning noncompetes nationwide. As noted in our [support](#) for the proposal, noncompete agreements in health care employment impede patient access to care and disrupt

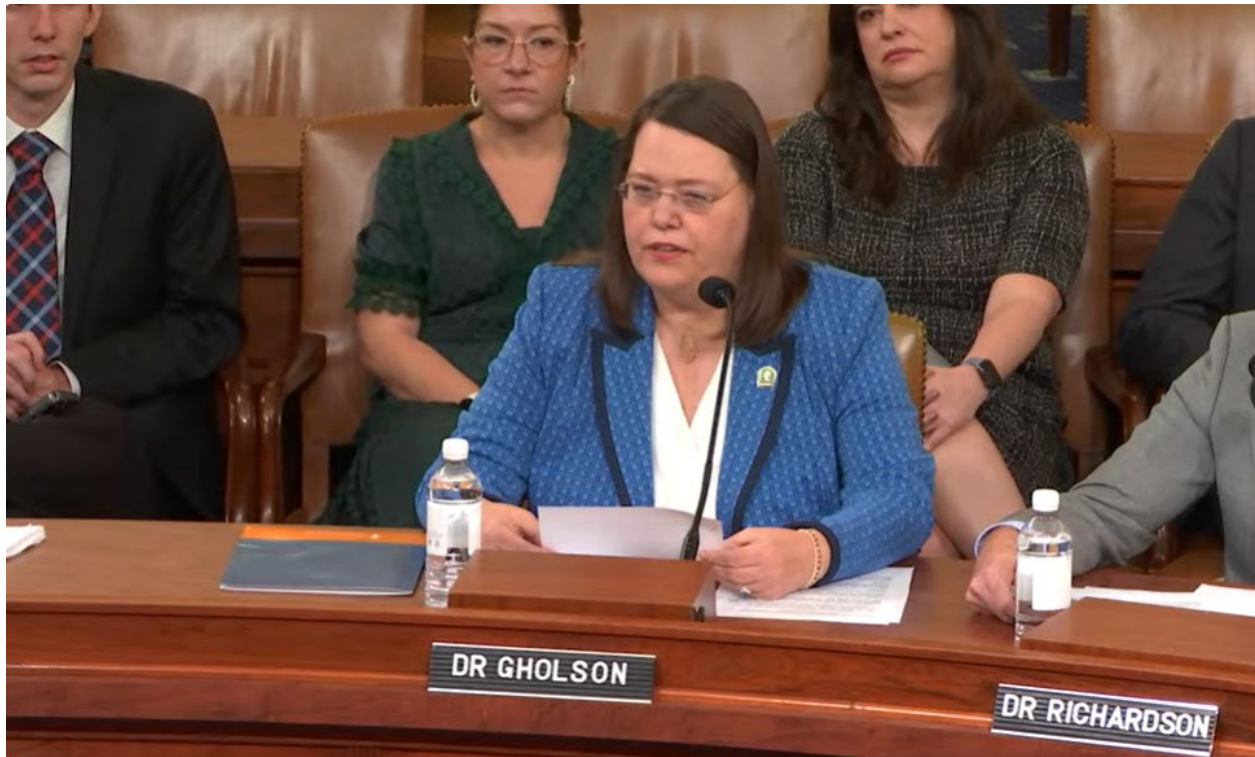
care continuity, deter advocacy for patient safety, limit physicians' ability to choose their employers, and stifle competition.

Additionally, the FTC, the Department of Justice, and the Department of Health and Human Services are working in partnership to protect health care competition. Earlier this month, the AAFP [responded](#) to the agencies' [request for information](#) on the effects of health care consolidation. Many family physicians noted that health system and private equity consolidation reduce physician autonomy and job satisfaction as well as patient access.

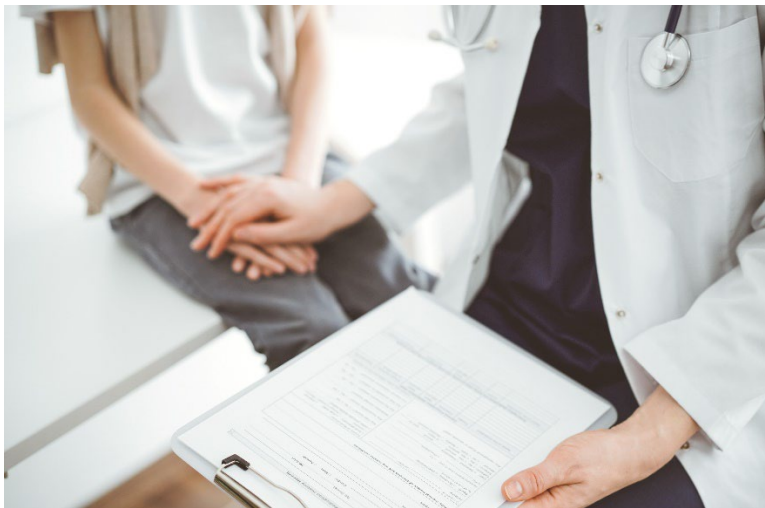
We urged the agencies to improve monitoring and enforcement of existing antitrust law and to work with Congress to expand their authority and resources to ensure competitive health care markets. We also suggested site-neutral payment policy and other payment reforms to address the drivers of health care consolidation.

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

- The AAFP issued a [statement](#) applauding the FTC's decision and specifically noted that we are encouraged to see that the FTC intends for this ban to extend to many nonprofit entities. Nonprofit health systems often have significant financial assets and employ a large portion of physicians and clinicians.
- The AAFP is hopeful that the rule will go into full effect on September 4 but recognizes the legal challenges in process are likely to result in an injunction, which would prevent the FTC from enforcing the rule. We are actively supporting reintroduction and passage of the Workforce Mobility Act, which will ban all noncompetes.
- AAFP member and Mississippi family physician Jennifer Gholson, M.D., FAAFP, testified last week before the House [Ways and Means Health Subcommittee](#) on the consolidation of primary care practices. In her testimony, Gholson outlined how many family physicians across the country have been forced into a false choice of either selling their practice or closing their doors entirely to avoid economic hardship. She [encouraged Congress to:](#)
  - improve Medicare reimbursement for primary care and provide prospective, sustainable revenue streams to allow physicians to tailor their practices to their patients' needs;
  - address misaligned incentives such as site-of-service payment differentials that encourage consolidation;
  - minimize the administrative burdens that independent primary care practices are subject to; and
  - ban the use of overly restrictive noncompete agreements.



### **AAFP Recognizes Mental Health Awareness Month**



#### ***Why it matters:***

Family physicians play a critical role in addressing mental health. They are often the first point of contact for patients seeking care and can provide screening, diagnosis, and treatment for mental health conditions. The AAFP consistently advocates for policies to better integrate mental health care and primary care for children and adults.

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

- The [AAFP has a media resource hub](#) to equip media with resources, interviews, and advocacy information as they cover mental health.
- In recent video interviews, [AAFP Board Members Jay Lee, M.D., M.P.H., FAAFP](#); and [Teresa Lovins, M.D., FAAFP](#), talk about the importance of addressing the mental health crisis. Media outlets are free to use these interviews for broadcast or publication with credit to the AAFP.
- Health care professionals still face increasing rates of mental and behavioral health conditions, suicide, and burnout than other professions. The AAFP has endorsed the [Lorna Breen Health Care Provider Protection Act](#) to ensure that the vital programs it established continue to be available to the health care workforce.

### **AAFP Shares Recommendations With Congress to Avoid Future Cyberattacks in Health Care**

The AAFP [shared recommendations](#) with the House Energy and Commerce Subcommittee ahead of its April hearing “Examining Health Sector Cybersecurity in the Wake of the Change Healthcare Attack.”

The cyberattack on Change Healthcare has had far-reaching implications for family physicians and other providers of health care services, affecting their ability to receive payments and perform everyday business functions that are essential to the delivery of care to patients. In our letter, we point out three considerations that Congress should explore as they pursue future legislation to strengthen the health care infrastructure to avoid another major attack:

- improving ease of access and affordability of cybersecurity insurance, especially for small, physician-owned practices;
- understanding and fortifying the resiliency of our nation’s health care infrastructure; and
- addressing the impacts of industry consolidation and lack of oversight on the health care infrastructure that supports delivering care to patients, especially those related to administrative functions that do not improve the quality or value of patient care.

### **FTC Rules on Health Privacy**



**Why it matters:** The FTC released the [Health Breach Notification Rule final rule](#), which requires vendors of personal health records and related entities that are not covered by HIPAA to notify individuals, the FTC, and in some cases the media of a breach of unsecured personally identifiable health data. The rule also finalized a new definition for “health care services or supplies” to include developers of wellness applications, including those that track medications, vital signs, fertility, and fitness, which the AAFP strongly supported.

A majority of the provisions the AAFP supported in [our feedback](#) of the proposed rule were finalized, and we appreciate the FTC’s efforts to preserve and protect the privacy and security of patients’ health information through this regulation.

### **Medicaid Final Rules Improve Access to Care**



**Why it Matters:** Medicaid payment rates are typically lower than Medicare rates and vary by state. Payment is one issue that influences clinician participation and beneficiary access in Medicaid. The AAFP urged the Centers for Medicare and Medicaid Services (CMS) to advance proposals to improve rate transparency in both the [Medicaid Fee-For-Service \(FFS\)](#) and [Medicaid Managed Care](#) Access rules. The AAFP is pleased that CMS finalized requirements for states to publicly post provider payment rates. This will enable policymakers, clinicians, and other stakeholders to more easily compare Medicare, Medicaid FFS, and Medicaid managed care payments by service and identify disparities.

Additionally, the AAFP is encouraged that CMS is establishing appointment wait time standards for Medicaid patients and requirements for states to post standardized quality measures about plans – proposal the AAFP supported to improve beneficiary experience.

### **Primary Care for America Brings Together Health Care Leaders, Innovators**



Primary Care for America is a diverse collaboration of key partners focused on educating policymakers and health policy influencers about the value of comprehensive, continuous and coordinated primary care. Its formation serves as a commitment to our continued effort to help improve the wellbeing of the individuals, families and communities that we proudly serve.

Last week, [leaders in the primary care community came together for the second annual PrimaryCare24](#) — a Primary Care for America conference. This year's event brought together leading health care thought leaders, innovators, and experts to discuss

- how to bridge primary care from the present to the future,
- evolving and strengthening the primary care workforce to meet growing demand,
- exploring the impact and importance of primary care,
- the massive role that primary care plays in promoting and facilitating access to care, and
- transforming health care delivery through innovation and looking back at the RBRVS.

If you missed the event, watch the stream at [primarycareforamerica.org](http://primarycareforamerica.org).

### **What We're Reading**

- [POLITICO](#) featured a quote from AAFP President Steven P. Furr, M.D., FFAFP, on the FTC's final rule to ban noncompete clauses. "This decision puts patients first and ensures family physicians can pursue opportunities that value their expertise and continue to provide high-quality care that their communities need," he said in a statement.
- AAFP Board Member Sarah Nosal, M.D., FFAFP, spoke to [Medical Economics](#) about the benefits of integrating primary care with behavioral health. Behavioral health integration enables a level of holistic, collaborative care that would be nearly impossible with someone outside the practice. It helps patients overcome any reluctance to get mental health counseling to be in familiar surroundings and know that she remains involved with their care.
- AAFP Chief Medical Informatics Officer Steven Waldren, M.D., M.S., spoke to [Women's Health](#) about the future of AI and primary care. He says most of his colleagues see "a tremendous amount of promise and hope by leveraging AI to be more efficient, reduce the clinician burden, and deliver higher-quality care."

For the latest policy updates on family medicine, follow us at [@aafp\\_advocacy](https://twitter.com/aafp_advocacy).





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**About American Academy of Family Physicians**

*Founded in 1947, the AAFP represents 130,000 physicians and medical students nationwide. It is the largest medical society devoted solely to primary care. Family physicians conduct approximately one in five office visits — that's 192 million visits annually or 48 percent more than the next most visited medical specialty. Today, family physicians provide more care for America's underserved and rural populations than any other medical specialty. Family medicine's cornerstone is an ongoing, personal patient-physician relationship focused on integrated care. To learn more about the specialty of family medicine and the AAFP's positions on issues and clinical care, visit [www.aafp.org](http://www.aafp.org). For information about health care, health conditions, and wellness, please visit the AAFP's consumer website, [www.familydoctor.org](http://www.familydoctor.org)*