



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.

### **AAFP Reacts to 2026 Medicare Physician Fee Schedule Proposed Rule**



The American Academy of Family Physicians (AAFP) is encouraged by proposed changes in the 2026 Medicare physician fee schedule that would help build a stronger, more sustainable health care system.

Notable updates proposed by CMS include:

- modernizing how medical services are valued,
- reducing barriers to patient-centered care and
- expanding support for behavioral health and at-home services through updated billing codes.

The AAFP also welcomes proposed increases to the Medicare conversion factor—3.8% for participants in qualifying alternative payment models and 3.6% for others—but notes that these are largely due to a one-year statutory increase. Without a long-term fix, practices continue to face renewed financial strain in 2027.

To ensure stability and continued access to care, the AAFP urges Congress to enact a permanent annual inflationary adjustment to Medicare payments. Read our full [statement](#).

### **CMS Final Rule Brings Changes to ACA Marketplace Enrollment and Coverage**

Starting Aug. 25, a new CMS rule makes several changes to ACA Marketplace coverage. While intended to improve oversight, the rule has sparked concern among health advocates, including the AAFP, for its potential to limit access to care, especially for vulnerable patients.

Key changes include

- ending monthly enrollment for low-income individuals,
- shortening open enrollment to end Dec. 31,
- allowing insurers to deny coverage for unpaid premiums,
- removing automatic re-enrollment for some,
- defining certain gender-affirming procedures as not essential benefits and
- excluding DACA recipients from ACA eligibility.

The AAFP pushed back on these provisions - warning they may harm patients and conflict with medical standards. We emphasized that care decisions should be guided by physicians, not regulations.

Some parts of the rule align with AAFP goals, including stronger broker oversight and keeping federal open enrollment open through year's end. However, new flexibility for state and non-Marketplace insurers to set their own timelines starting in 2027 remains a concern.

### **AAFP and 100+ Health Organizations Urge Protection of USPSTF**



**Why it matters:** The United States Preventive Services Task Force's (USPSTF) transparent, rigorous and scientifically independent process ensures that patients can benefit from trusted, evidence-based preventive care, and that physicians can make up-to-date recommendations. Recent actions by the Department of Health and Human Services have put that at risk.

**What we're working on:** The AAFP [joined](#) more than 100 health organizations in a joint letter to Congress urging lawmakers to protect the integrity of the USPSTF. The Task Force makes recommendations for primary care and disease prevention through a rigorous, multistep process in collaboration with the public and medical experts. These include cancer screenings, mental health counseling, vision exams and much more.

### **300+ Family Physicians Call on Lawmakers to Support Family Medicine**



Last month, more than 300 family physicians from across the country convened in Washington, D.C., for the Family Medicine Advocacy Summit. Physicians from 44 states met with lawmakers and congressional staff to share stories and champion legislative policies that bolster family medicine, including:

- Preserving the Medicaid program. Medicaid is a critical safety net for millions of Americans—from routine checkups and maternal care to mental health and life-saving preventive services. Any funding cuts or restrictive reforms would put vulnerable patients at risk and increase costs across the system.
- Reforming Medicare physician payment. Our outdated Medicare payment system undervalues and underpays for primary care, threatening the stability of physician practices and their capacity to provide essential care. Sustainable, long-term payment reforms are urgently needed to support the viability of primary care.
- Protecting the Public Service Loan Forgiveness (PSLF) program, as well as other loan-repayment and scholarship programs. Family physicians often carry significant student debt, and many choose to serve in high-need areas where salaries may not reflect the critical work they do. PSLF is a lifeline—helping keep physicians in the communities that depend on them most. We urged lawmakers to protect and expand upon these programs, so that more physicians can afford to answer the call to service without being buried in debt.
- Urging Congress to protect [public trust in vaccines](#) and evidence-based care. Getting vaccinated helps protect vulnerable people, including newborns and people with weakened immune systems. It creates a community of immunity.
- AAFP president Jen Brull, MD, FAAFP, wrote about these critical topics in an [op-ed in Medscape](#).

### **AAFP Disappointed Over Passage of H.R. 1**



As highlighted during the Family Medicine Advocacy Summit, family physicians repeatedly [expressed](#) deep concerns with several provisions in H.R. 1, which was signed by President Trump on July 4. Sweeping and draconian cuts across the health care system will leave as many as 16 million individuals without health care coverage over the next 10 years.

The AAFP will continue to advocate for policies that protect Medicaid and put patients first.

### **AAFP Submits Feedback on NIH's Proposed AI Strategy**

The AAFP has weighed in on the National Institutes of Health's (NIH) forthcoming artificial intelligence (AI) strategy. The letter emphasizes the [unique role of family medicine](#) in delivering comprehensive, person-centered care, as well as the need for AI tools to support, not disrupt, that experience.

The AAFP urges NIH to adopt a principles-first approach, anchored by transparency, equity, trustworthiness and accountability. We also call on NIH to embed practicing physicians throughout the AI lifecycle—from design to evaluation—to ensure that tools are practical, effective and aligned with real-world care delivery.

The AAFP's recommendations highlight the importance of rigorous evaluation, workforce readiness and cross-agency alignment, while advocating for AI solutions that reduce administrative burdens and advance health equity.

[Read the full letter.](#)

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

- Amid rising measles cases, AAFP President Jen Brull, MD, FAAFP, spoke to [CNN](#) about the urgent need for Americans to get vaccinated.
- AAFP President-elect Sarah Nosal, MD, FAAFP, conveyed to [Bloomberg](#) the risk of disappearing federal data.
- Dr. Nosal also spoke to [Medscape](#) about how doctors can help patients who lose insurance under federal budget cuts.
- AAFP Board Director Shannon Dowler, MD, FAAFP, appeared on the *New York Times'* [The Daily](#) podcast to talk about how cuts to Medicaid will harm rural communities.