



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 Shares Fall Priorities with Policymakers



Why it matters: Health care costs keep rising, straining physicians, families and communities. Too many patients still struggle to access primary care, partly due to a graduate medical education system that doesn't produce enough primary care doctors. Despite spending more than peer nations, the U.S. continues to lag in outcomes such as treatable diseases and preventable deaths.

What we're working on: [The AAFP urged Congress](#) to expand support for primary care by:

- Reauthorizing and funding key programs that expand access, especially in rural and underserved areas (Teaching Health Center Graduate Medical Education, Community Health Center Fund, National Health Service Corps).

- Making permanent the telehealth flexibilities that empower patients and physicians to choose the best mode of care.
- Protecting federal investments in core health programs through appropriations.
- Permanently extending ACA Advanced Premium Tax Credits to keep coverage affordable for lower-income families.

AAFP Responds to ACIP Decisions



Why it matters: Vaccines have saved countless lives and remain one of our most important tools for protecting patients and communities. Narrowing vaccine recommendations limits patient autonomy and risks undermining the trust in public health we've worked so hard to build

What we're working on:

- The [AAFP](#) submitted written testimony to the Advisory Committee on Immunization Practices (ACIP), calling on ACIP to “restore and prioritize scientific integrity, transparency and continuity in deliberations.”
- The ACIP's vote to [remove shared clinical decision-making](#) for the combination MMRV vaccine for children under four years old could limit access to vaccination against preventable diseases and undermines efforts to protect vulnerable populations.
- The vote on COVID-19 vaccines will create real confusion and consequences for patients' trust. These vaccines have prevented countless hospitalizations and deaths for both children and adults. Family physicians remain the [best source](#) for conversations and trusted information about vaccines.

Family Physicians Call on President to Reconsider Secretary Kennedy's Ability to Serve

Under HHS Secretary Robert F. Kennedy Jr.'s leadership, key public health protections have been weakened, and the immunization review process is devoid of experts and evidence. The American Academy of Family Physicians urged the president to prioritize the health and safety of the American people by re-evaluating Secretary Kennedy's ability to serve in his current capacity. Read our full [statement](#).

The AAFP also [expressed concern](#) about turmoil at the Centers for Disease Control and Prevention. The firing of Director Susan Monarez, the resignation of multiple senior officials, and circumventing processes for reviewing data and science are alarming, threatening our nation's public health infrastructure. Leadership and oversight from Congress are needed now to ensure that our nation's public health is protected.

Physician Leaders Call on Lawmakers to Support Access to Care



Why it matters: AAFP President-elect Sarah Nosal, MD, FAAFP, joined leaders from the American Academy of Pediatrics, the American College of Obstetricians and Gynecologists, the American College of Physicians, the American Psychiatric Association and the American Osteopathic Association in Washington, D.C., to champion legislative policies that bolster access to care. The [Group of Six](#) fly in is one strategy in which we push for policy priorities that

elevate primary care. Many of these echo our fall priorities, which we shared with lawmakers above.

What we're working on:

- **Making telehealth flexibilities permanent:** Telehealth has improved access and reduced missed appointments, especially in rural and underserved areas. With Medicare flexibilities set to expire Sept. 30, the AAFP, AAP, ACOG, ACP, AOA and APA urged Congress to make them permanent.
- **Strengthening the primary care workforce:** The U.S. faces a shortage of up to 40,400 primary care physicians by 2036. Key programs, including the Teaching Health Center Graduate Medical Education (THCGME) program, the National Health Service Corps (NHSC) and the Community Health Center (CHC) Fund, expire Sept. 30. Congress must reauthorize and fully fund them to preserve access to care in communities that need them the most.
- **Protecting vaccine access:** At the start of flu and respiratory illness season, patients need clear recommendations by qualified experts to ensure easy access to vaccines. Recommendations made by the Advisory Committee on Immunization Practices (ACIP) set insurance coverage requirements, and conflicting guidance is creating barriers to vaccine access.

Family Physicians Spotlight Priorities in 2026 Medicare Physician Fee Schedule

Why it matters: The Centers for Medicare and Medicaid Services (CMS) is recognizing the vital link between community-based physicians and community health, a step forward for primary care.

What we're working on: The AAFP is [urging CMS](#) to:

- **Advance payment accuracy:** Implement an efficiency adjustment for non-time-based services and update direct practice expense inputs, so payments better reflect real-world clinical practice and technological advancements.
- **Modernize data sources:** Transition to empiric, regularly updated data—such as Medicare claims and hospital cost reports—for rate setting and collaborate with medical specialty societies to ensure that future data collection is robust and representative.
- **Strengthen primary care management:** Refine and expand Advanced Primary Care Management (APCM) codes and waive patient cost-sharing for APCM services to improve access and uptake for Medicare beneficiaries.
- **Recognize care complexity:** Expand the use of the G2211 add-on code to home and residence visits, ensuring that physicians providing longitudinal, relationship-based care are appropriately compensated for the complexity of their work.

The AAFP is also [supporting](#) CMS proposals in the 2026 Outpatient Prospective Payment System to reduce site-differential payments that reward consolidation and improve hospital price transparency. CMS should develop a more consistent, cohesive approach to addressing upstream drivers of health across all Medicare payment programs.

AAFP Continues to Fight for Student Debt Relief Options



Why it matters: Federal student debt relief programs are important tools that strengthen American communities and help fill critical workforce shortages. Reliance on the Public Service Loan Forgiveness (PSLF) program has increased significantly over recent years, with some studies showing more than 40% of physicians are enrolled.

Student loan debt incurred during training is a significant barrier to addressing the physician workforce shortage the U.S. is facing, which is why the AAFP supports efforts to reduce the debt burden incurred by physicians, including through medical school educational loan forgiveness programs.

What we're working on: The AAFP submitted two recent comment letters to the U.S. Department of Education, emphasizing that addressing the burden of student loan debt for physicians and medical students is one essential step to improving our nation's health care system. We also highlighted that:

- Implementing H.R.1 loan provisions in ways that support future primary care physicians will strengthen the health care workforce in the long term.
- Minimizing administrative burdens on medical students is crucial to those students successfully accessing federal debt relief programs that enable them to choose the practice environment that best suits them.

- [Protecting GRAD PLUS loans](#) is critical to supporting medical students.
- [Recognizing and supporting the PSLF program](#) as an important tool in building a strong primary care workforce will contribute to a healthier America with fewer chronic diseases.
- Expanding federal loan repayment programs will reduce debt and help address physician shortages in rural and underserved areas.

What We're Reading

- The [AAFP released fall immunization recommendations](#). "History shows us that vaccines have eradicated diseases that were disabling and deadly in the past, and we can keep it that way if we continue to vaccinate," said Margot Savoy, MD, MPH, CPE, FAAFP, chief medical officer of the AAFP.
- AAFP President Jen Brull told [Prevention](#), "we need innovation that strengthens connection, not just efficiency." She added: "In my dream world, every person in America would have access to a trusted primary care physician, and AI and automation would help free up physicians to do what we do best: listen, connect and care."
- Robert Graham Center Director Yalda Jabbarpour, MD, spoke to [Medscape](#) about how Medicaid cuts reflect a "deeply concerning trend" in health policy: the "systematic underinvestment" in primary care. "At a time when [more than a third of adults and 15% of children lack a usual source of care](#), we should be expanding access — not restricting it," she said.