The AMA and OSMAP: Partners in solving health care challenges

Patrice A. Harris, MD, MA
President
American Medical Association

AMA's commitment to equity across health care

Tyeese Gaines, DO
Member since 2013

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AMA works to create greater health equity in America

Policy

The AMA's House of Delegates has adopted dozens of policies calling for: reducing racial and ethnic disparities in health care; increasing diversity in the medical profession; and eliminating bias among health professionals.
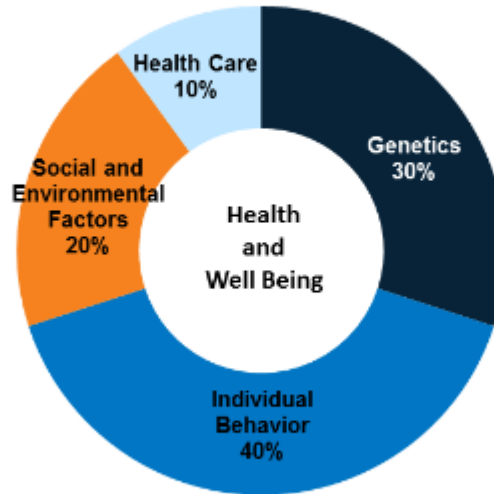
Advocacy

The AMA advocates for policies, such as expanded access to care for all, and for adequate funding of safety net programs.

Tools

The AMA creates tools such as the *Health Disparities Toolkit*, for physicians to use to implement better health literacy and culturally competent care in their own practices.

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Impact of social determinants of health

Figure 2
Impact of Different Factors on Risk of Premature Death

Health Care 10%

Genetics 30%

Social and Environmental Factors 20%

Health and Well Being

Individual Behavior 40%

SOURCE: Schroeder, SA. (2007). We Can Do Better — Improving the Health of the American People. NEJM. 357:1221-8.

KFF
HENRY J KAISER FAMILY FOUNDATION

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Efforts to protect patient access to care

- The AMA remains committed to protecting coverage for the 20 million Americans who acquired it through the ACA and expanding coverage for those who do not currently have it.

- AMA supports policies that would improve the coverage options for many who are underinsured and/or cite costs as a barrier to accessing the care they need.

- AMA supports Medicaid expansion as a means of reducing the number of uninsured individuals.

- AMA filed an amicus brief in opposition to plaintiff arguments in Texas v. Azar and is working to reverse the December 2018 district court decision.

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Fully integrating mental health

AMA policy:

Supports parity of coverage for mental illness, alcoholism, substance use and eating disorders; (H-185.974)
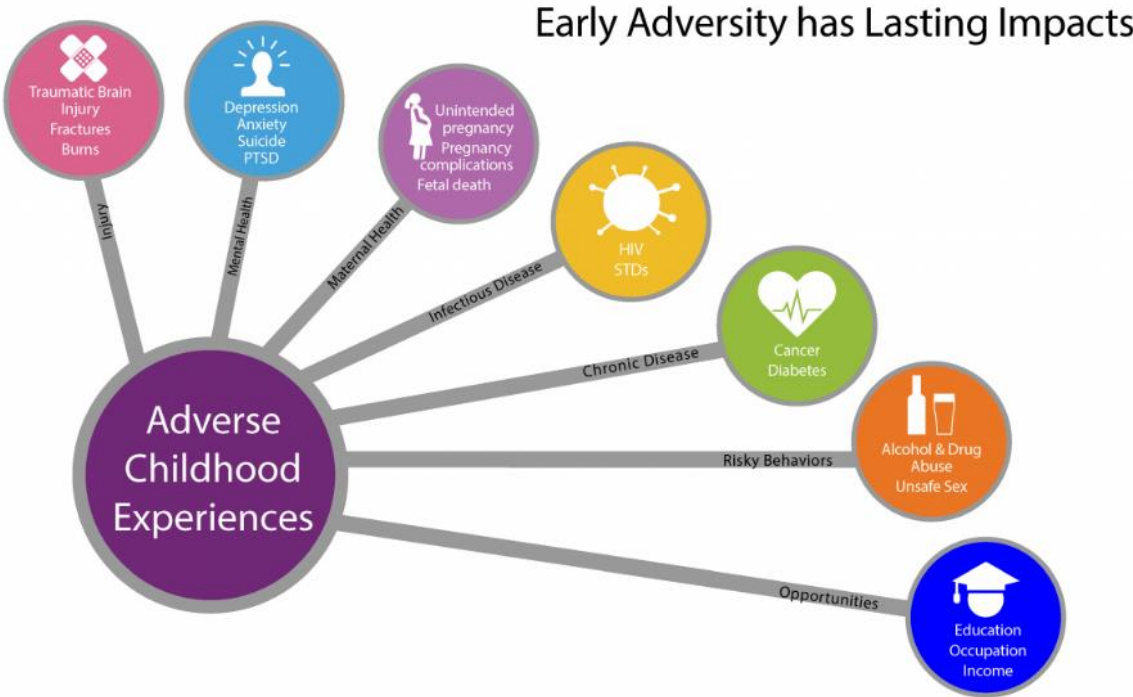
Supports health care policies that ensure access to and payment for integrated medical, surgical, and psychiatric care regardless of the clinical setting; (H-345.983)

Supports increasing public awareness, reducing stigma and expanding patient access to quality care for depression and other mental illnesses; (H-345.984)

Encourages all physicians to acquire the knowledge and skills to recognize, diagnose and treat depression and other mental illnesses; (H-345.984)

Supports competent mental health care and outreach for at-risk communities; (H-345.984)

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The Impact of Adverse Childhood Experiences

Early Adversity has Lasting Impacts

Source: CDC

Advocacy for immigrant children and families

- Health and safety at the southern border

- Asylum-seekers and vaccines

- Mental health of children in DHS custody

- Family detention policies

- Deferred action for critically ill children

- Inadmissibility on public charge grounds
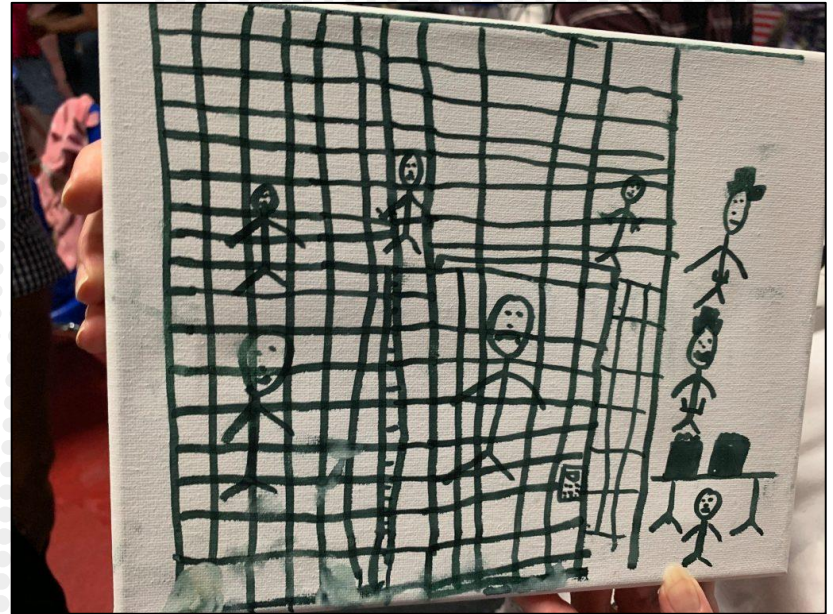
Source: Georgia Health News

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Representing physicians with a unified voice

Nakisa Sadeghi
Member since 2018

Moudi Hubeishy
Member since 2015

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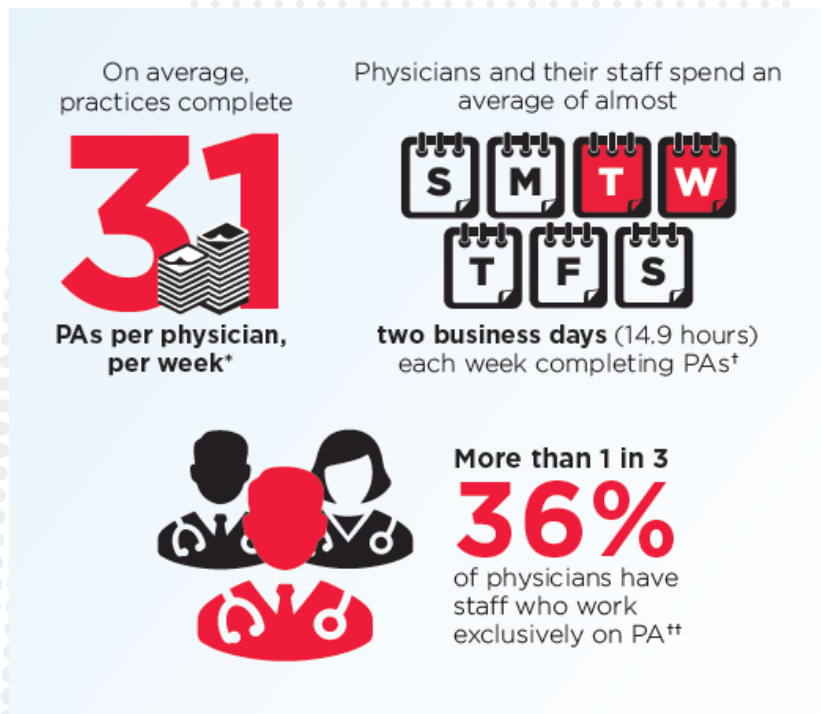ASSOCIATION

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Working with CMS to overhaul E/M codes and reduce paperwork burdens

- AMA has been working with CMS to achieve the first overhaul of E/M office visit documentation and coding in more than 25 years.

- AMA recommendations are included in the 2020 Medicare Physician Fee Schedule Final Rule.

- This new approach is a significant step in reducing administrative burdens that get in the way of patient care.

- Visit **ama-assn.org/cpt-office-visits**

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Right-sizing prior authorization

- Working directly with national partners and the insurance industry to "right-size" prior authorization

- Pushing state legislation to address prior authorization and step therapy and advocating to national policymaking organizations for regulation of these programs and entities

- Creating new resources to help practices streamline prior authorization

  ➢ Visit **FixPriorAuth.org**

On average, practices complete

31

PAs per physician, per week*

Physicians and their staff spend an average of almost

| S | M | T | W |
| T | F | S | |

two business days (14.9 hours) each week completing PAs†

More than 1 in 3

36%

of physicians have staff who work exclusively on PA††

Source: 2018 AMA Prior Authorization Physician Survey

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Consensus statement on improving prior authorization

- Released in **January 2018** by the AMA, American Hospital Association, America's Health Insurance Plans, American Pharmacists Association, Blue Cross Blue Shield Association, and Medical Group Management Association

- Five "buckets" addressed:
  - Selective application of PA
  - PA program review and volume adjustment
  - Transparency and communication regarding PA
  - Continuity of patient care
  - Automation to improve transparency and efficiency

- **GOAL**: Promote safe, timely, and affordable access to evidence-based care for patients; enhance efficiency; and reduce administrative burdens
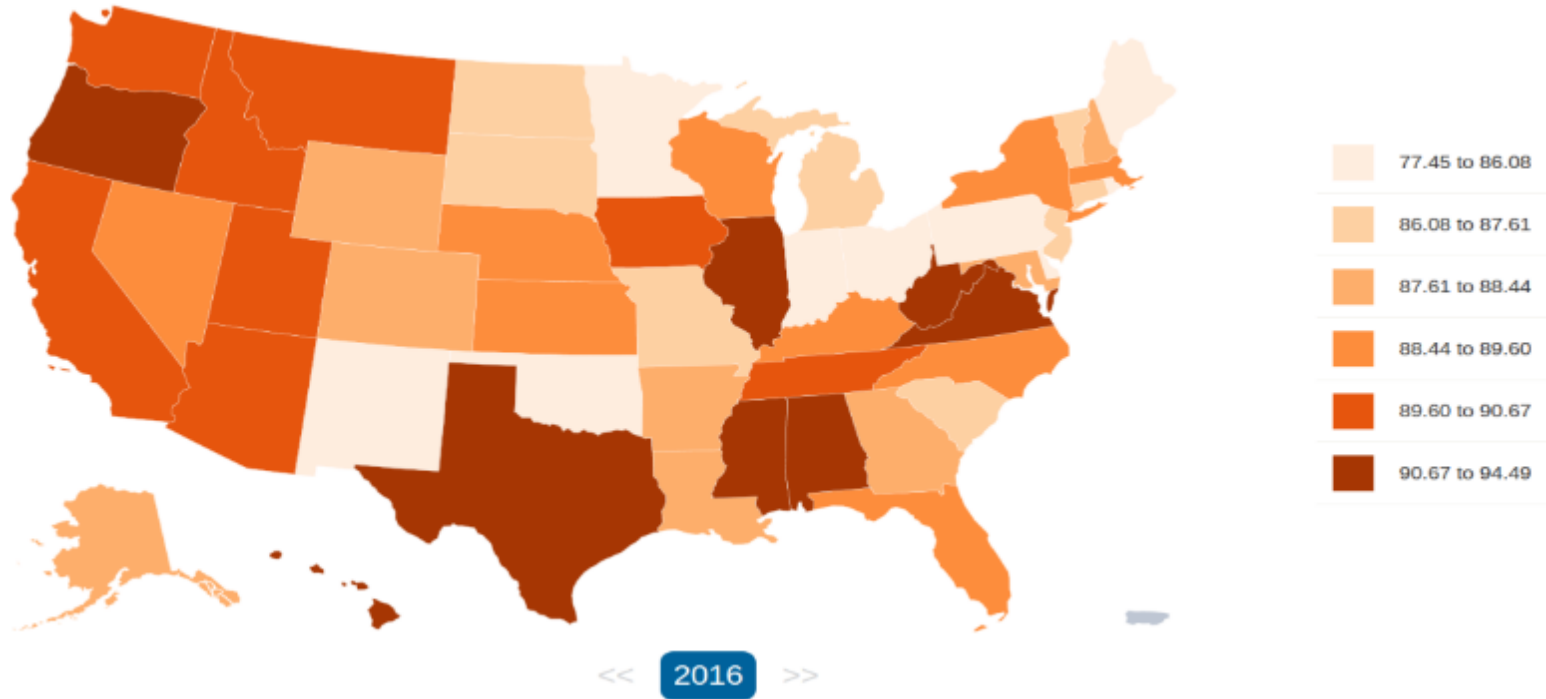
Progress of the AMA Opioid Task Force

- Opioid prescribing has decreased by 33 percent since 2013.

- PDMP registration and use continues to increase; more than 450 million queries were made in 2018.

- Treatment capacity is increasing. More than 66k physicians are certified to provide buprenorphine to treat opioid use disorder.

- Physicians are enhancing their education – more than 700k physicians and others took CME in pain management and substance use disorders in 2018.

- Naloxone prescriptions increased to nearly 600k in 2018.
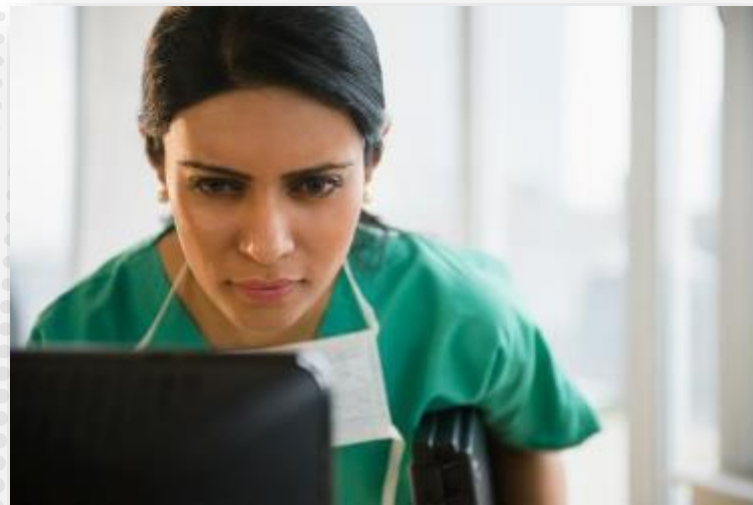
(Source: AMA Opioid Task Force 2018 Progress Report)

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Percent population needing, but not receiving, treatment

Legend:
- 77.45 to 86.08
- 86.08 to 87.61
- 87.61 to 88.44
- 88.44 to 89.60
- 89.60 to 90.67
- 90.67 to 94.49

<< 2016 >>

Source: NSDUH, http://opioid.amfar.org/indicator/pctunmetneed

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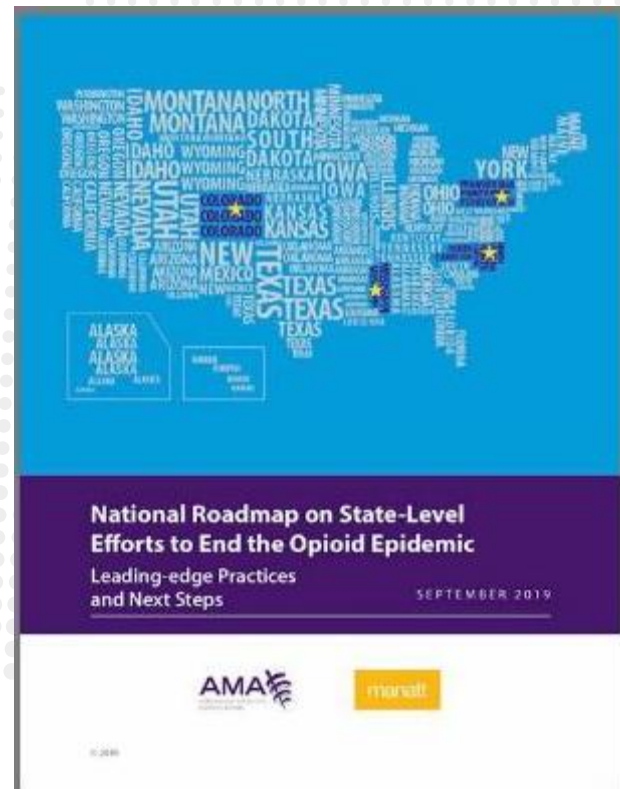# New recommendations from the Opioid Task Force

- Remove prior authorization, step therapy and other administrative burdens for MAT

- Enforce state and federal mental health and substance use disorder parity laws

- Remove barriers to pain care

- Increase access to treatment for pregnant women and mothers

- Support access to treatment within the civil and criminal justice systems

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National Opioid Policy Roadmap highlights efforts in four states making a difference
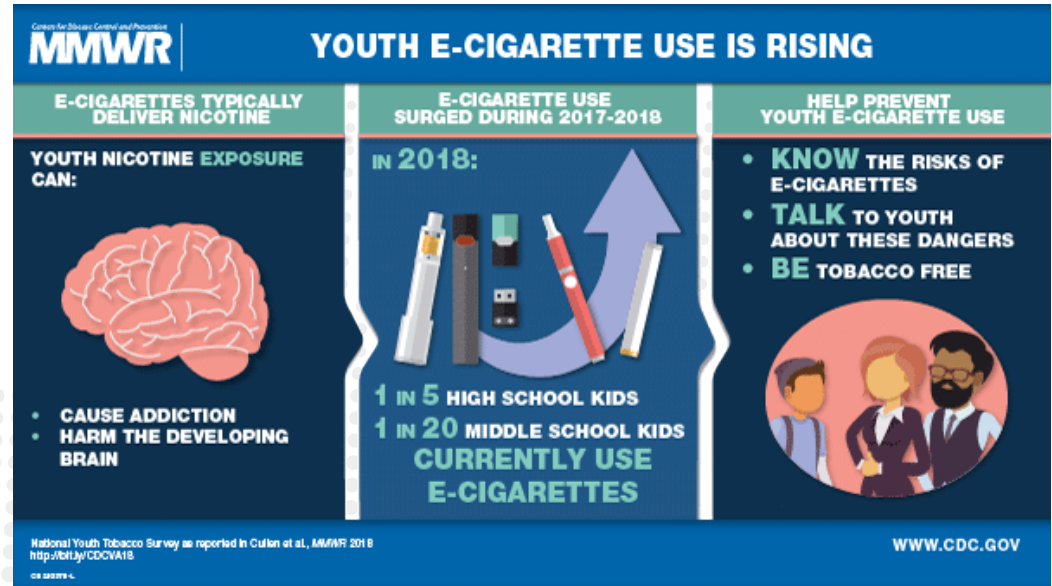
Key to success is medical societies **taking action** to support:

- Vigorous state oversight and enforcement of mental health and SUD parity

- Access to comprehensive, multidisciplinary, multimodal pain care

- Removing prior authorization and other barriers to medication-assisted treatment

- Evaluating current policies to determine what works and what needs revision or removal

National Roadmap on State-Level Efforts to End the Opioid Epidemic
Leading-edge Practices and Next Steps   SEPTEMBER 2019

The urgent threat of vaping

- Mysterious and serious lung illness linked to vaping found in **49 states**.

- More than **2,000 cases** in U.S.
  - **39 deaths**

➢ AMA urges the public to avoid use of e-cigarette products until health officials further investigate and understand the cause of these illnesses.

➢ AMA calls on e-commerce platforms to better police illicit and illegal vaping products on their sites.

MMWR | **YOUTH E-CIGARETTE USE IS RISING**

E-CIGARETTES TYPICALLY DELIVER NICOTINE

YOUTH NICOTINE EXPOSURE CAN:
- CAUSE ADDICTION
- HARM THE DEVELOPING BRAIN

E-CIGARETTE USE SURGED DURING 2017-2018

IN 2018:

1 IN 5 HIGH SCHOOL KIDS
1 IN 20 MIDDLE SCHOOL KIDS
CURRENTLY USE E-CIGARETTES

HELP PREVENT YOUTH E-CIGARETTE USE
- KNOW THE RISKS OF E-CIGARETTES
- TALK TO YOUTH ABOUT THESE DANGERS
- BE TOBACCO FREE

National Youth Tobacco Survey as reported in Cullen et al., MMWR 2018
http://bit.ly/CDCVA18

WWW.CDC.GOV

CDC Morbidity and Mortality report, 2018

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