Advocacy: Influencing the Legislative Process to Improve the Future of Family Medicine

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FMCH Retreat
May 11, 2023
Learning Objectives

By the end of this seminar participants will:

• Understand the importance of advocacy. “If you aren’t at the table, you’re on the menu”
• Appreciate the impact that family physicians and other health care providers can have on the legislative process
• Learn about current legislative activities relevant to family medicine
• Identify opportunities for engagement in advocacy activities
Disclosures

- We have contributed to political candidates
- We have contributed to political parties
- We have contributed to political action committees (PAC’s)
Advocacy 101

• **Support for a cause or position**
  • let them know if you are for or against a policy
  • make suggestions for improvement
  • use your expertise to educate

• **Forms of advocacy**
  • meet with legislators
  • write to or call legislators
  • work with organized medicine
  • attend FMCC or NAC
  • financial contributions (individually or PAC’s)
  • vote for your candidate
  • it’s OK to let your patients know what you think
  • social media
Distinguishing Ourselves

• Advocates are not the same thing as lobbyists
• You are constituents giving of your own time and treasure
• No one paid you to say what you are saying
Emphasize our Difference

• Physician advocacy carries a special cachet
• Family Physician advocacy is even more special
• Make it about our patients
• Use personal stories
Goals of HCR

• Increase number of covered Americans
• Decrease healthcare costs
• Improve healthcare quality
• How do you accomplish all three?

  More Primary Care
Play Nice

• Do respect the Office
• Don’t be insulted if you are meeting with their legislative aide (they’re the ones who do a lot of the work)
• Bring data to the knife fight
  • Handouts are good
  • Offer to send follow-up information about data you quote
Play Together

- Find out what their issues are
- Find even small areas of agreement: e.g.
  - Somehow the uninsured need to be taken care of
  - Somehow the cost of care needs to be moderated
  - Somehow we need to improve quality
Challenges

• The Landscape
  • There are finite resources – and intense competition for them
  • Health care already consumes too much

• We all have day jobs

• You may feel unprepared
  • Used to a high-level of mastery; feels out-of-scope
Being effective requires that you ...

• Articulate and refine your message(s) and request(s)
• Identify all stakeholders
• Do some homework: Learn the perspectives, values, and priorities of others
• Develop a strategy
• Amplify and leverage your power; identify who’s on your “team”
• Get an audience with the right people
• Choose your time and place
• Play the long game: cultivate relationships
• Follow up after meeting
PC4You Legislation

The Burning Platform

1. Fee-For-Service (FFS) incentivizes volume rather than quality which has a negative impact on consumers and workforce.

2. Our current healthcare system creates large inequities, leaving too many without adequate care.

3. The exorbitant cost of healthcare is unsustainable; this hurts individuals, families, and businesses.

4. Incremental changes have failed to address the problems, so a new model and non-incremental change is required.

5. Primary Care is the only healthcare activity for which an increased supply is associated with improved population health, lower costs, and decreased inequities.

6. Inadequate Primary Care Pipeline with declining workforce
1. PCP proportion of physician workforce is falling

2. PCP physician workforce is relatively old; retiring soon

3. PCPs are leaving PC

So ... How’s the pipeline?
Current System

PC4You

Self-interest

Profit

Health

Equity
Overarching Goals of PC4You Legislation

1. Change predominant payment model for Primary Care from Fee For Service (FFS) to a monthly prospective payment in order to align incentives with patient-centeredness and team-based care
2. Double Primary Care Investment in Massachusetts
3. Decrease health inequities and facilitate dismantling systemic racism in healthcare
Primary Care for You (PC4You)

• Focuses on commercial payors, who are required to participate; optional for PCPs
• Calls for a doubling of investment in primary care
• Sub-capitation for PC without additional PCP administrative burden or responsibility for TME
• Rates to practices or larger PC entities determined by multiple factors:
  • Historical costs
  • Medical and social risk of population served
  • Degree to which practices adopt a set of practice improvement “transformers”
  • Quality measures: only 5, chosen from a menu of 10 (at least 2 must be patient experience measures)
Massachusetts Primary Care Trust (administered by HPC)

Patients

Better outcomes and experience

Primary care practices and Health Systems who opt into PC4You

Massachusetts Primary Care Trust

Use of taxes gets around self-insured vs. fully-insured distinction; self-insured would choose this as they would not want to pay twice for primary care

Commercial insurers

Attest or demonstrate PC Transformers

$$$

Tax

$$$

$$$

Commercial insurers

Attest or demonstrate PC Transformers

Massachusetts Primary Care Trust

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Massachusetts Primary Care Trust (administered by HPC)
Investment in Primary Care Transformation

Targeted investment in primary care transformation activities
Will require attestation by each practice (subject to random audits)

- Integrated Behavioral Health$^{17,23}$
- Community Health Workers$^{24}$
- Addiction Care (MAT)$^{18}$
- Health Coaches/Peer Recovery Coaches$^{25,26}$
- Care Managers$^{27}$
- Group Visits$^{28}$
- TeleHealth$^{29,30}$
- Direct Investment in Health-Related Social Needs$^{31}$
- Medical Interpretation Services$^{32}$
- Home Care$^{33}$
- Palliative Care$^{34}$
- Extended Office Hours$^{35}$
- Additional Time with patients$^{35}$
- Urgent Care/Walk In Availability$^{35}$
- Patient Advisory Groups$^{36}$
- Pharmacy Consultants$^{37}$
- Medical Scribes$^{38}$
MassHealth 1115 Waiver

• Application for new 1115 waiver submitted (begins 4/1/2023)
• To inform processes on tiering, quality, and risk, the PC Council will use the MassHealth systems as a guide

• Five overarching goals (consistent with PC4You)
  1. Value-Based Care
  2. Primary Care, Behavioral Health, Children
  3. Health Equity
  4. Sustainable mechanism to fund safety net
  5. Simplify system, including behavioral health
Doubling Primary Care Investment while keeping MA TME flat

Ideas to Consider

• ROI from doubling PC investment may take several years (eliminate waste)
• Slight cap on rate of price growth for large hospital systems
• Tax on Commercial Insurance Surplus
• Tax on Large Health System/Payer reserves or excess reserves
• Tax For-Profit Health Systems
• Tax Pharma/PBMs
Primary Care for You (PC4You): Current Status

• Filed in the MA Senate in January

• Feb 16: Referred to Committee on Health Care Financing; House concurred

• Endorsements
  • Massachusetts Medical Society
  • UMass Memorial Health Care (Eric Dickson, MD, CEO)
  • Health Care For All (HCFA)
  • Massachusetts Academy of Family Physicians (MassAFP)
  • Massachusetts Association for Mental Health (MAMH)

• Updates
WE WANT YOU! … to PARTICIPATE

Find our voice
Get on message
Amplify our voice

https://malegislature.gov/Search/FindMyLegislator
How To Get Involved In Advocacy

https://www.massafp.org/
https://www.massmed.org/
https://www.aafp.org/home.html
Mission Statement MassAFP

• The mission of the Massachusetts Academy of Family Physicians is to assist its members in providing compassionate, high quality healthcare to the people of Massachusetts.

• The vision of the Massachusetts Academy of Family Physicians is to provide responsible advocacy, representation and leadership for our members and to promote the specialty of family medicine through public awareness and patient education.
Mission Statement of the Massachusetts Medical Society

• "The purposes of the Massachusetts Medical Society shall be to do all things as may be necessary and appropriate to advance medical knowledge, to develop and maintain the highest professional and ethical standards of medical practice and health care, and to promote medical institutions formed on liberal principles for the health, benefit and welfare of the citizens of the Commonwealth."
Advocacy is a central component of the Massachusetts Medical Society's mission. We advocate on behalf of patients for a better health care system, and on behalf of physicians, to help them to provide the best care possible.
Some Recent MMS Resolutions

Combating Racial Disparities in Maternal and Infant Health Outcomes
Sponsor: Committee on Maternal and Perinatal Welfare
**Sara Shields, MD, MS, FAAFP, Chair**

Preventing Adverse Childhood Experiences (ACEs)
Sponsor: Committee on Public Health
**James Broadhurst, MD, MHA, Chair**

Preventing Decreased Access to Health Care by Expanding Broadband Internet Access to Underserved Populations
Sponsor: Ronald Dunlap, MD, FACC

**Resolution to Ensure Equitable Access to HIV and Hepatitis C Testing in the Jail and Prison Systems in Massachusetts**
Sponsors: Joshua St. Louis, MD, MPH, AAHIVS Jennifer Brody, MD, MPH, AAHIVS Joe Wright, MD Audra Williams, MD, MPH Lance Braye, MD, MPH Tuhin Roy, MD, MPH Chelsea Harris, MD Nicholas Weida, MD Christopher Bositis, MD, AAHIVS

**Primary Care for You (PC4You)**
Sponsors: Wayne Altman, MD, Alain Chaoui, MD, Joshua St. Louis, MD, Jennifer Chiang, MD Katherine Atkinson, MD, Michael Kaplan, MD

That the MMS support legislation that creates a system of primary care that is based on a state-administered primary care trust that is funded by all payers, covering all residents of Massachusetts, delivering global payments to primary care practices that incentivize practice transformation and allocates resources in an intentionally antiracist and just fashion.
Some Recent AMA Resolutions

• Strengthening U.S. public health infrastructure and opposing limits placed on public health authorities
• Combating public health disinformation
• Enhancing privacy for people who use mail-order DNA testing kits
• Limiting the authority to grant medical exemptions for vaccinations
• Improving maternal health and eliminating maternal health inequities
• Refining recommendations for evidence-based policing reform
• Ensuring that a diverse range of skin tones is represented in dermatology medical education
• Requiring health insurer transparency regarding patients’ out-of-pocket costs for individual prescription drugs
• Bolstering the physician workforce in rural communities
• Advocating for heat exposure protections for outdoor workers
Advocacy & Government

AAFP News' Advocacy & Government section features coverage of the Academy's advocacy on issues important to family medicine at the federal and state levels. Stories outline the specialty's views on various health policy and legislative topics, funding for key health care programs and efforts to simplify the regulatory burden placed on family physicians.

Recent Advocacy & Government Stories

May 10, 2023  Telehealth Controlled Substance Rx Flexibilities Extended
May 01, 2023  AAFP Webinar Prep Members for End of Public Health Emergency
Apr 20, 2023  New CMS Prior Authorization Rule Reflects Academy Advocacy
Apr 19, 2023  Academy Backs Ending Noncompete Clauses, Urges More Action
Apr 13, 2023  AAFP Eyes Medicare Payment Win in New Legislation
Mar 24, 2023  Simplify Controlled Substance Rx Training, AAFP Advises
Mar 17, 2023  Quality Measures Must Reduce Administrative Burden, AAFP Tells CMS
Mar 06, 2023  AAFP Urges Congress to Strengthen Value-based Care Support
Feb 21, 2023  2024 Medicare Advantage Rule-making Shows AAFP Advocacy
Feb 13, 2023  Academy Renews Push for Medicare Add-on Code
Feb 09, 2023  Evolving Telehealth Policy Brings Opportunities, Concerns
Feb 02, 2023  Lowering of SUD Treatment Barriers Marks AAFP Advocacy Success
Jan 11, 2023  Congress Gets Detailed Cybersecurity Advice From AAFP

Speak Out Now

Home Page →
Strengthen Your Voice →
Join the Academy: Speak Out Now
What else is happening ...

- **Manju Mahajan as new WFMR Advocacy Director**
  - Member of legislative committee with MassAFP, has addressed:
    - telehealth pay parity, scope of practice, providing universal nutritious school meals across the state, increasing primary care investment and improvement in workforce
  - Meets with residents during PAL blocks
  - Develops curricula to train residents in multidimensional roles that family doctors play in advocating for their patients and communities within local, state and national systems
  - Elected as member constituency Alternate Delegate for National Conference of Constituency leaders (NCCL) and will be co-convener for NCCL 2024
  - Currently at AAFP State Legislative Conference (SLC)

- **Greater Worcester community efforts: Hugh Silk**
Wrap-Up

• What are **YOU** doing?
• What do you think **needs to be done**?

• Join us for the breakout to go deeper