

Washington Policy Update – A Year in Review and Looking Ahead

ACP State Health Policy Networking Webinar January 24, 2022

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2021 ACP ADVOCACY HIGHLIGHTS

ADVOCATING TO SUPPORT INTERNISTS
AND THEIR PATIENTS



Click on each item to learn more



Championed Initiatives to Advance the Value of Internal Medicine and Primary Care

- [I.M. Proud](#): Celebrated National Internal Medicine Day, internists, and the profession of internal medicine
- Sponsored the National Academies of Sciences, Engineering, and Medicine report, [Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care](#)
- Collaborated to develop a [New Unified Vision for Changing Primary Care Finance](#)
- Became a Co-Founder of [Primary Care for America](#), a public affairs campaign

Supported Internists' Needs During the COVID-19 Crisis

- Helped obtain [pay parity for both telehealth and audio-only visits](#) during the public health emergency, and pushed to continue increased availability of telehealth post pandemic
- Pushed for [PPE, regulatory relief, and financial assistance](#) for practices
- Coordinated distribution channels to [support procurement of PPE](#)
- [Published clinical guidance](#) on treatment efficacy and safety, as well as PPE usage
- Held series of [ACP-Annals of Internal Medicine COVID-19 forums](#) on practical clinical considerations and implications
- Developed and updated in real time [clinical and practical tools and information](#)
- Joined with HHS as a founding member of the [COVID-19 Community Corps](#) to help increase vaccine uptake
- Called for COVID-19 vaccine mandates for all [health care workers, employers, and schools](#)



The Year in Review

- Advanced the value of internal medicine and primary care
- Supported members needs during COVID-19
- Combated Racial Disparities and promoted DEI
- Physician Fee Schedule and Quality Payment Program improvements
- ACP priorities included in other federal programs
- New ACP Policies

https://www.acponline.org/system/files/documents/advocacy/md1108-1_advocacy_highlights_flyer_web.pdf

Medicare Cuts... diverted for now!

- **Sequestration:** Three-month delay of the Medicare sequester payment reductions (January 1, 2022 - March 31, 2022) and a three-month, one percent reduction in Medicare sequester payment reductions (April 1, 2022 - June 30, 2022). This policy would be offset by changes to sequester payment reductions during the fiscal year 2030.
- **Fee Schedule Cuts:** One-year increase (through December 31, 2022) in the Medicare physician fee schedule of 3 percent. This is applied across the board and without distinction to all payments under the Medicare physician payment schedule. This is a slight decrease from the 3.75 percent provided by Congress last year for FY 2021 under the *Consolidated Appropriations Act of 2021*.
- **PAYGO:** delays the application of PAYGO cuts from 2022 to 2023

A Comprehensive Policy Framework to Understand and Address Disparities and Discrimination in Health and Health Care

- ACP believes in “good health care for all, poor health care for none”
- Social drivers of health, racism and discrimination, economic and educational disadvantages, health care access and quality, individual behavior, and biology, affect a person's health
- “We must recognize and confront the fact that many elements of U.S. society, some of which are intertwined and compounding, contribute to poorer health outcomes. If we accept that no one element of society is solely responsible for creating disparities, then any strategy to eliminate disparities that addresses any element independently of the others will fail to accomplish its goal.”

Annals of Internal Medicine

POSITION PAPER

A Comprehensive Policy Framework to Understand and Address Disparities and Discrimination in Health and Health Care: A Policy Paper From the American College of Physicians

Josh Serchen, BA; Robert Doherty, BA; Omar Atiq, MD; and David Hilden, MD, MPH, for the Health and Public Policy Committee of the American College of Physicians*

Racial and ethnic minority populations in the United States experience disparities in their health and health care that arise from a combination of interacting factors, including racism and discrimination, social drivers of health, health care access and quality, individual behavior, and biology. To ameliorate these disparities, the American College of Physicians (ACP) proposes a comprehensive policy framework that recognizes and confronts the many elements of U.S. society, some of which are intertwined and compounding, that contribute to poorer health outcomes. In addition to this framework, which includes high-level principles and discusses how disparities are interconnected, ACP offers specific policy

recommendations on disparities and discrimination in education and the workforce, those affecting specific populations, and those in criminal justice practices and policies in its 3 companion policy papers. ACP believes that a cross-cutting approach that identifies and offers solutions to the various aspects of society contributing to poor health is essential to achieving its goal of good health care for all, poor health care for none.

Ann Intern Med. doi:10.7326/M20-7219

Annals.org

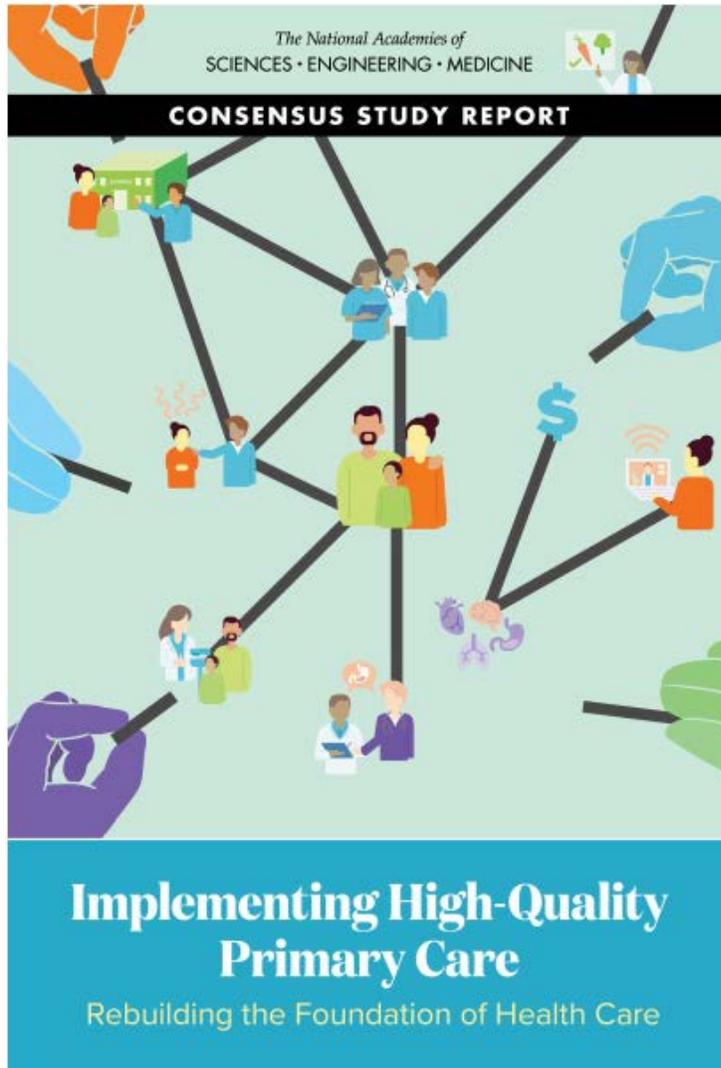
For author, article, and disclosure information, see end of text.

This article was published at Annals.org on 12 January 2021.

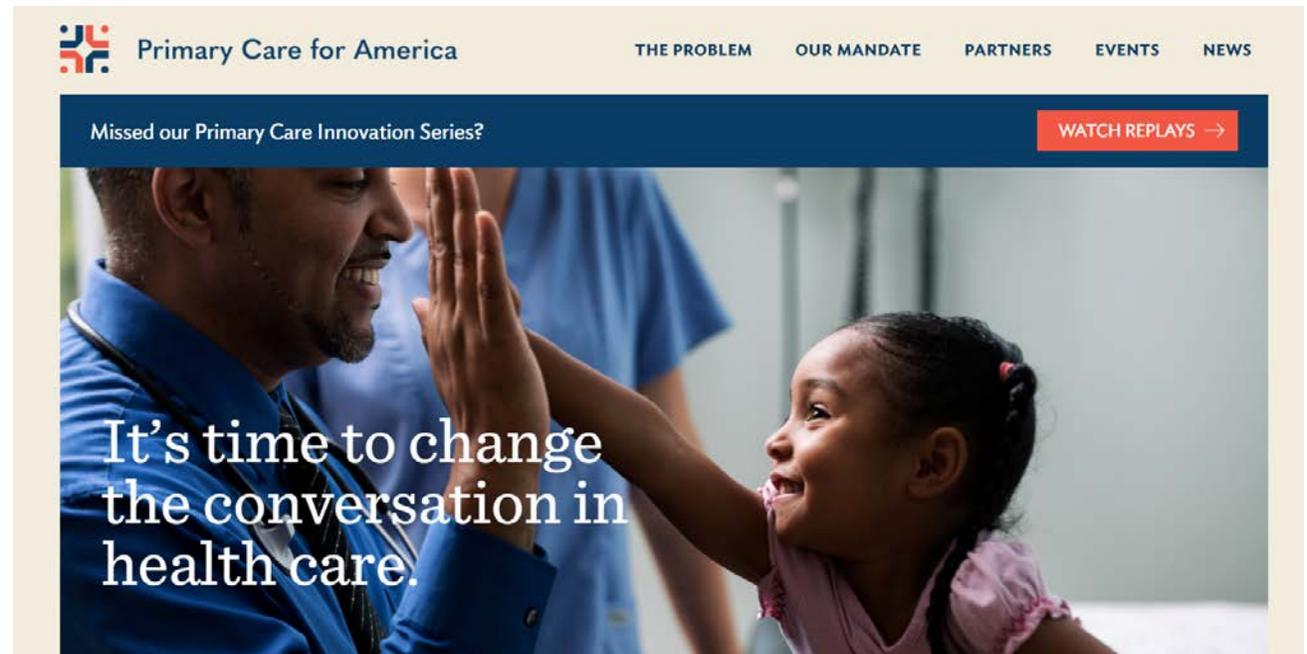
Research has shown that Black, Indigenous, Latinx, Asian American, Native Hawaiian, Pacific Islander, and other persons in the United States experience disparities in health and health care associated with their race, ethnicity, religion, and cultural characteristics and identities. Although the reasons for such disparities are multifaceted, discrimination and biases, both explicit and implicit, are major contributors to lower rates of health care access and coverage (1, 2), higher rates of mortality and morbidity (3, 4), and poorer health outcomes, and

everyone has access to high-quality health care and the best possible health outcomes—good health care for all, poor health care for none—this cannot be achieved without understanding and addressing the unique circumstances of persons who are discriminated against because of their race, ethnicity, religion, and cultural characteristics and identities, including the effect of discrimination and racism on health. In this paper, ACP proposes a comprehensive, interconnected, and evidence-based policy framework to understand, address, and end such disparities. As

Primary and Comprehensive Care



COVID-19 is a catalyst for change. Even as each of our 7 organizations took immediate actions to support our 400,000+ members and diplomates, we knew



Going beyond primary care to physician-led teams

- ACP's [Medical Neighborhood Model \(MNM\) Alternative Payment Model](#) (developed in partnership with NCQA) was [recommended](#) by the Physician-Focused Payment Model Technical Advisory Committee (PTAC) to HHS in 2020.
 - HHS Secretary Becerra recently [responded](#) to the PTAC recommendation and asked the CMS Innovation Center staff to have further discussions with the submitters as to how specialty practices can be better engaged in innovative delivery models
 - ACP is continuing discussions with CMMI re: this model
- ACP also remains actively engaged in efforts to improve performance measures, from the work our own [Performance Measures Committee](#) does to being on key NQF, MAP, CQMC, and other external committees.

Additional New ACP Policies

- Made recommendations to protect patients-over-profit orientation in [Financial Profit in Medicine](#)
- Called for policies to strengthen veterans' health care in [Health Care for Our Nation's Veterans](#)
- Released [Health Information Privacy, Protection, and Use in the Expanding Digital Health Ecosystem](#) policy

Priorities for 2022

Appropriations for FY2022 and FY2023 and aspects of Build Back Better

Medicare Payment Reform – Payment cuts, FFS, APMs, MACRA, etc.

Telehealth – pay parity, flexibilities

COVID-19 and Public Health Preparedness

Medicaid Pay Parity and Access

Prescription Drug Pricing

Women's health

Behavioral health

Addressing racial and ethnic disparities

With Congress unlikely to act on many ACP priorities, chapter advocacy is more important than ever

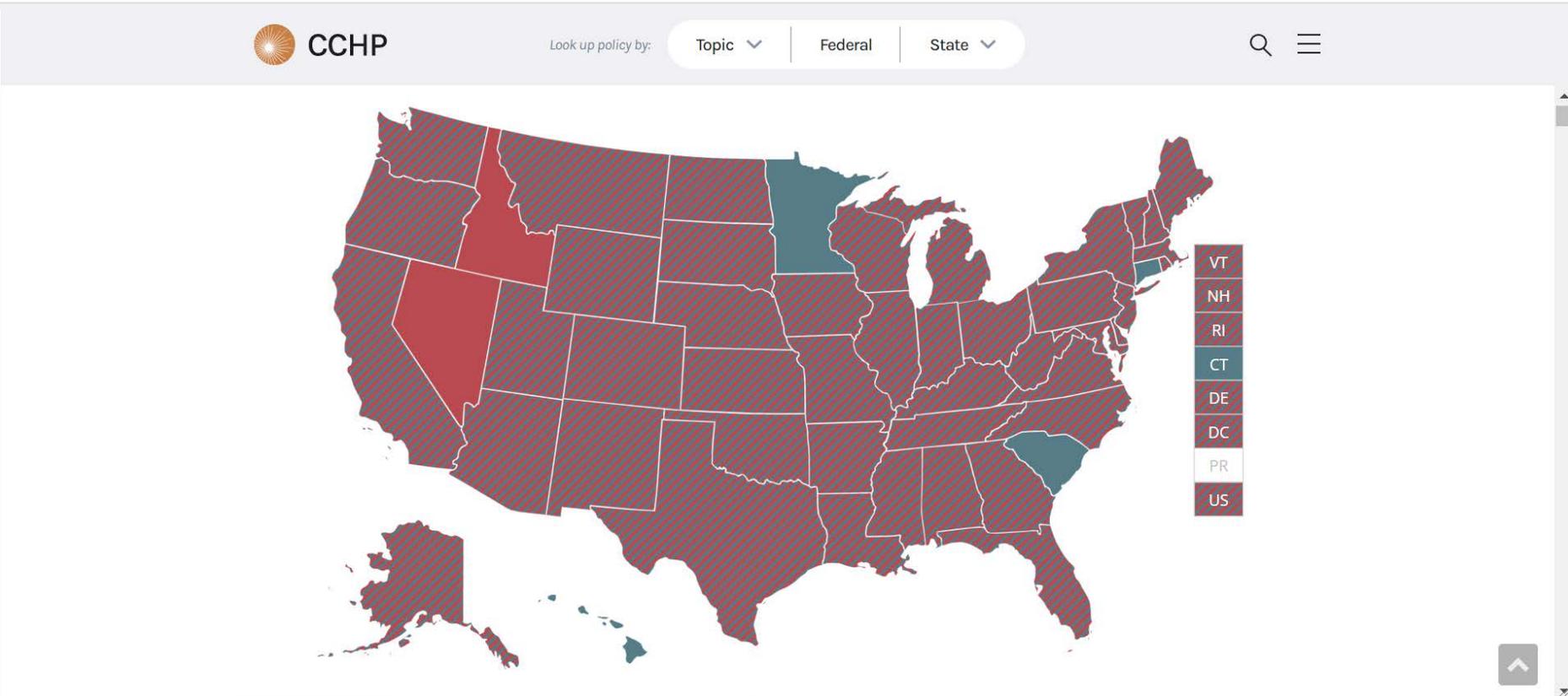
- States are expected to consider legislation on:
 - Telehealth
 - Vaccines, COVID and public health
 - Health equity and DEI
 - Reproductive health/interference with the patient-physician relationship
 - Firearms related deaths and injuries
 - Medicaid expansion and pay parity with Medicare
 - Among other ACP priorities
- Your chapter advocacy can make all the difference!
- We are from Washington, and we are here to help you. *REALLY.*

Pending Telehealth Legislation

Telehealth Legislation & Regulation

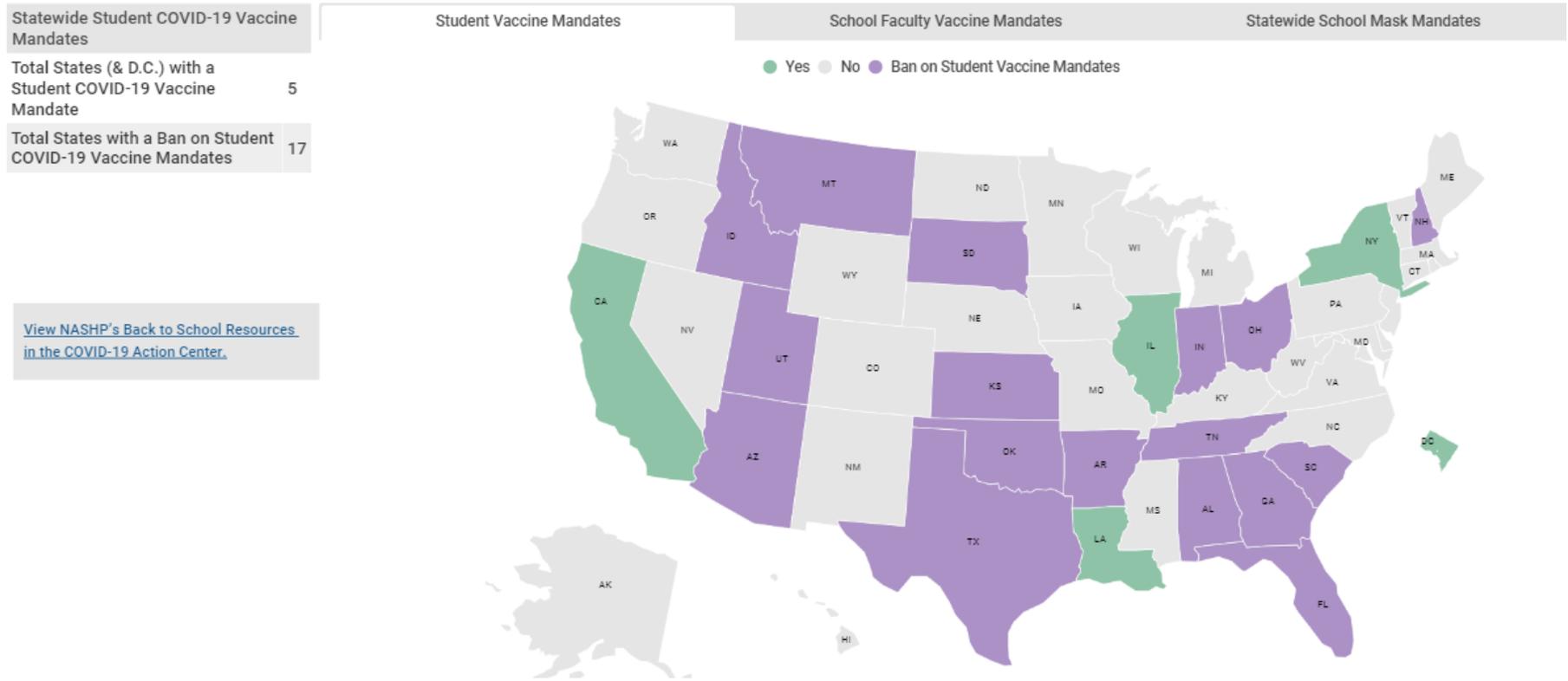
Utilize the interactive 50 state legislation and regulatory tracking tool, located below, to browse telehealth legislation and regulation across the nation for the current legislative session.

<https://www.cchpca.org/pending-legislation/>



State laws on COVID vaccines for children

With children ages five and older now eligible for the COVID-19 vaccine and booster shots widely available to adults, states are continuing to develop policies on vaccine requirements in schools, both for students and faculty. States are also addressing school mask mandates amidst increasing youth vaccination rates and fluctuations in pediatric COVID-19 cases. Explore states' up-to-date approaches to school COVID-19 vaccine and mask requirements on the map below.



Republicans are changing state laws to try to get out of federal vaccine mandates

National Public Radio, November 22, 2021

“New laws strengthening religious exemptions for COVID-19 vaccines could also wind up undercutting laws on the books requiring vaccinations for school-aged children.

‘It sets a precedent,’ says Dr. Marcus Plescia, the chief medical officer for the Association of State and Territorial Health Officials. “It’s particularly concerning for childhood vaccinations.”

He cites previous national measles outbreaks where some people garnered religious exemptions and remained unvaccinated. In cases like that, Plescia says, public health officials have often been able to lobby religious leaders to convince them of the good vaccines would do in their communities.

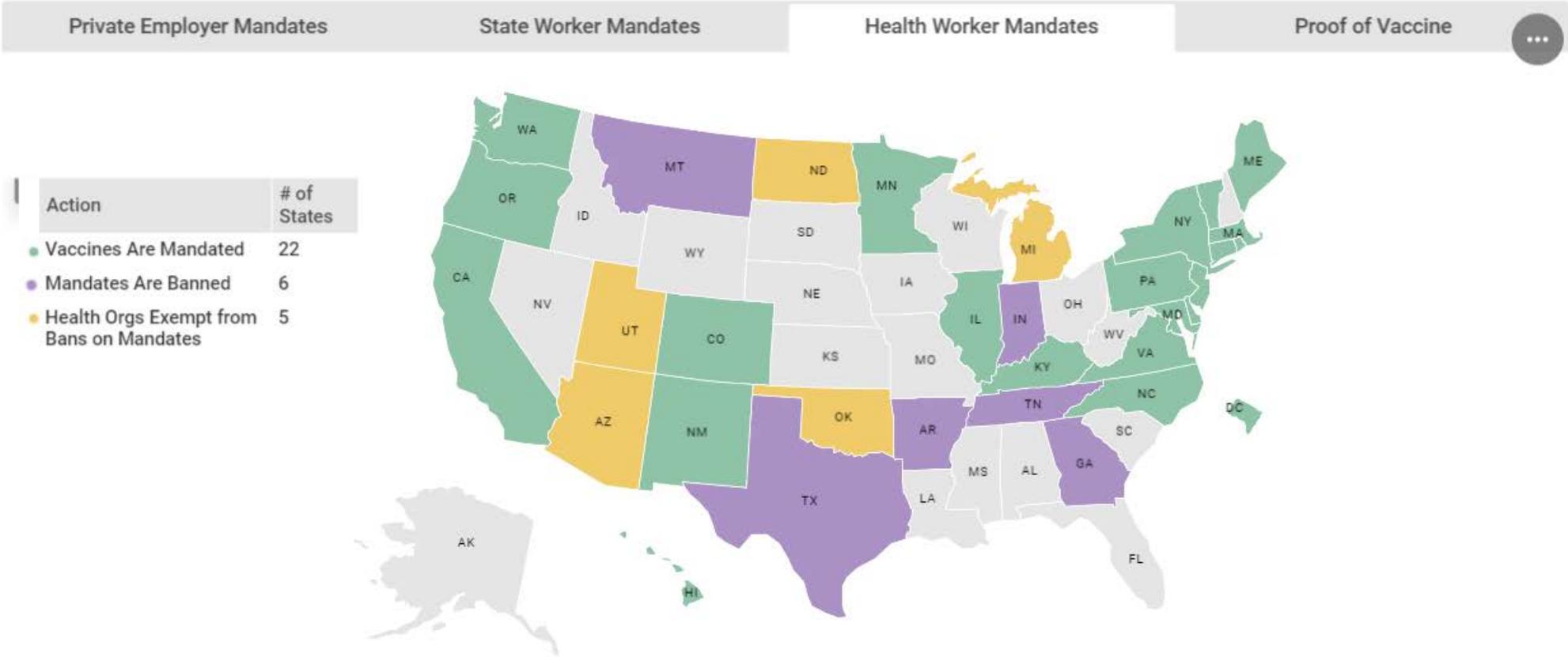
But in this case, he said some of these religious exemptions “aren’t really something that religions themselves are even calling for.”

State and local health officials face this political and legal fight when they’re already besieged by the pandemic. That’s made it harder to campaign against new laws that could have far-reaching effects on a range of vaccinations.

‘There’s not a clear sort of national advocate who can step in,’ Plescia says.”

State laws on health worker vaccine mandates

For the latest on state vaccine and mask mandates in schools, view NASHP's regularly updated map.



State laws and bills to advance health equity

“In recent years policymakers have recognized the disparities experienced by various populations and related financial costs to the health care system and state. A [2017 report by NCSL](#) highlights different state actions regarding health disparities legislation related to:

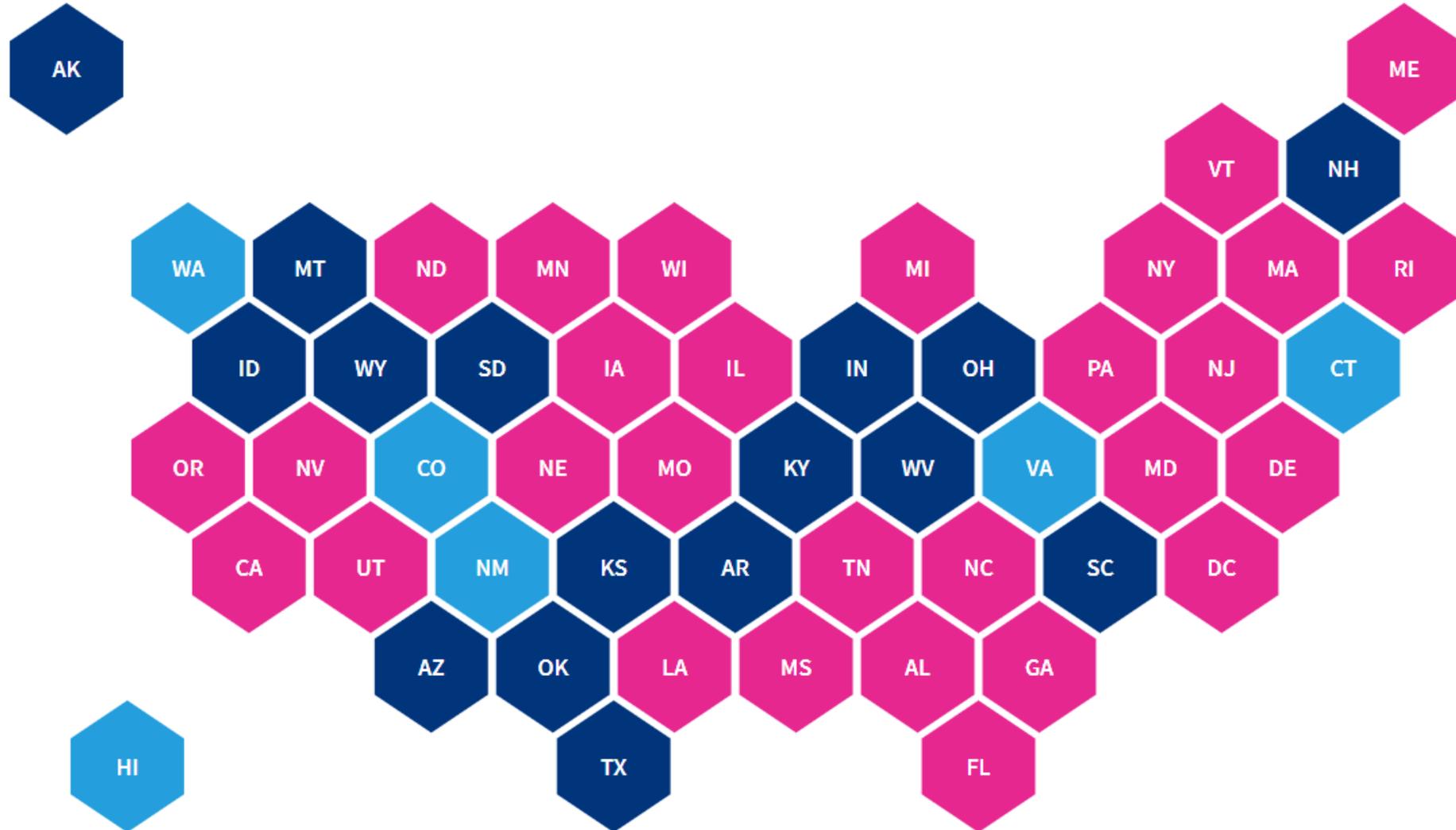
- Improving access to health care services.
- Increasing health care workforce diversity and cultural competency.
- Addressing disparities in chronic disease and other health conditions racial and ethnic minorities experience.
- Supporting task forces, committees or research focused on health disparities.
- Addressing [social determinants of health](#).

In the wake of COVID-19, and the evidence highlighting health disparities among historically underserved populations, several states have changed data reporting requirements, increased equitable access to referral systems, required different state executive branch agencies to study, update and implement policies that address health disparities where applicable, and issued executive orders and [declared racism as public health crisis](#). ”

Twenty-two states passed new laws regulating access to abortion in 2021.

State-level laws passed in 2021 about abortion

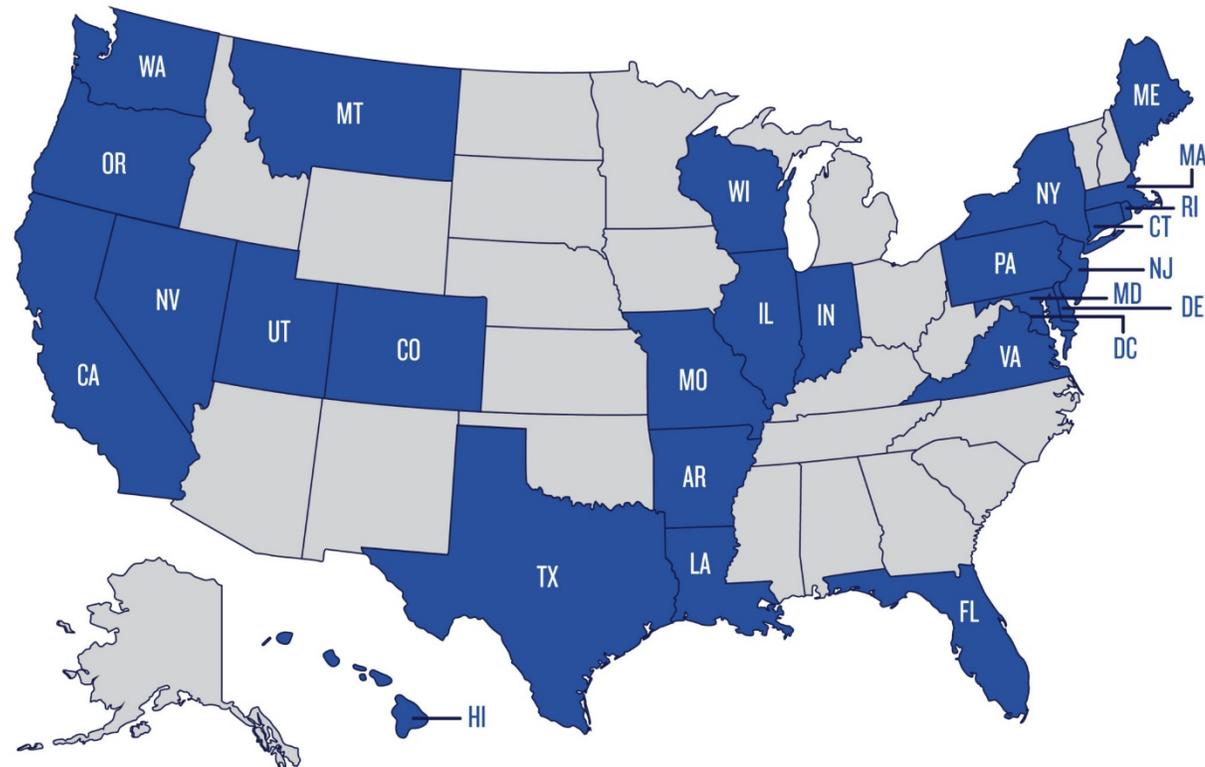
■ No new abortion law passed ■ Passed laws restricting access to abortion ■ Passed laws expanding access to abortion



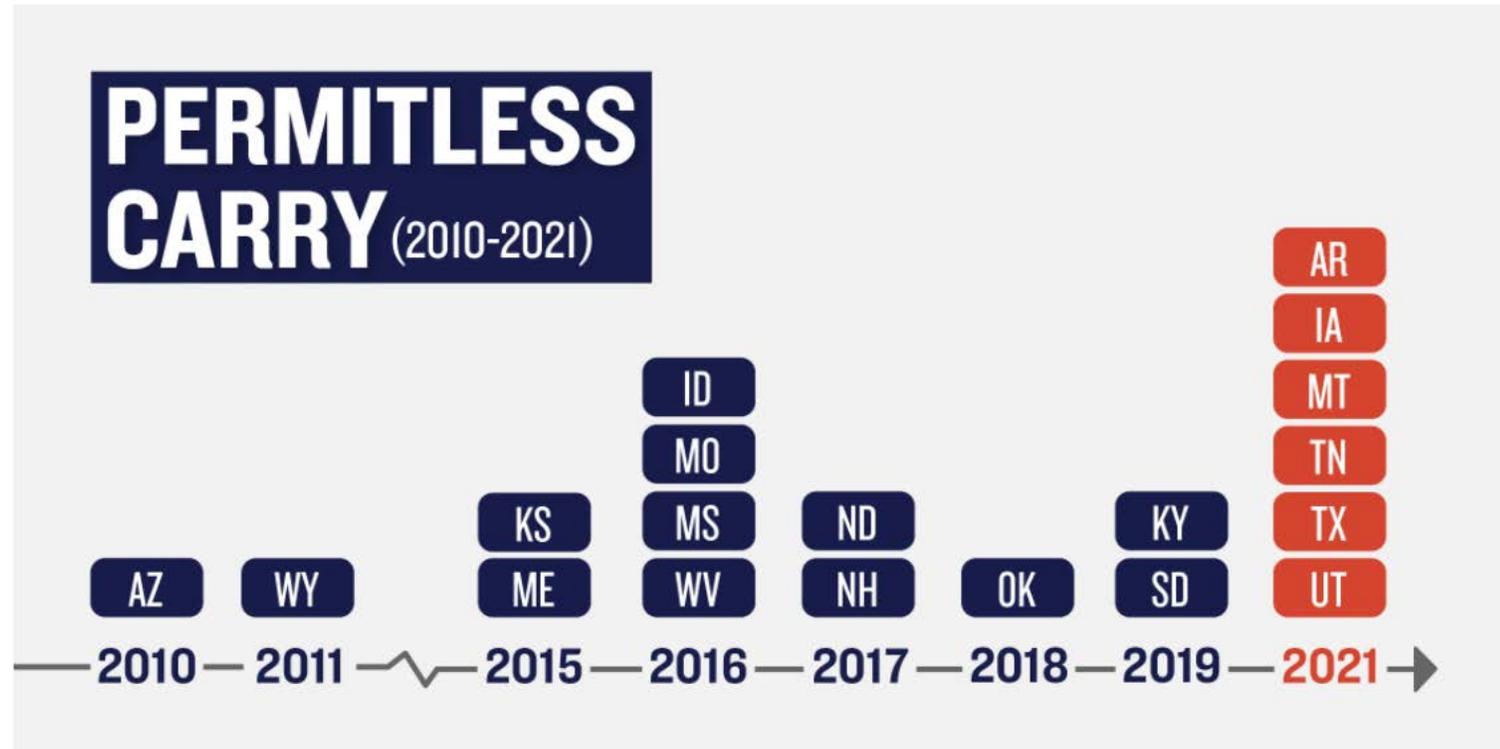
https://usafacts.org/articles/states-passed-a-record-number-of-restrictive-abortion-laws-in-2021/?utm_source=google&utm_medium=cpc&utm_campaign=ND-Healthcare&gclid=CjwKCAiA0KmPBhBqEiwAJqKK4-hsdlSR-m65nTdNHRt36Ct-p8K_dCS466DeC4DEZ3L_ssDNXf7MfxoCDzYQAvD_BwE

States have passed laws to improve gun safety, such as background checks, child access/safe storage, community violence intervention, concealed carry licensing, ghost guns, red flag laws

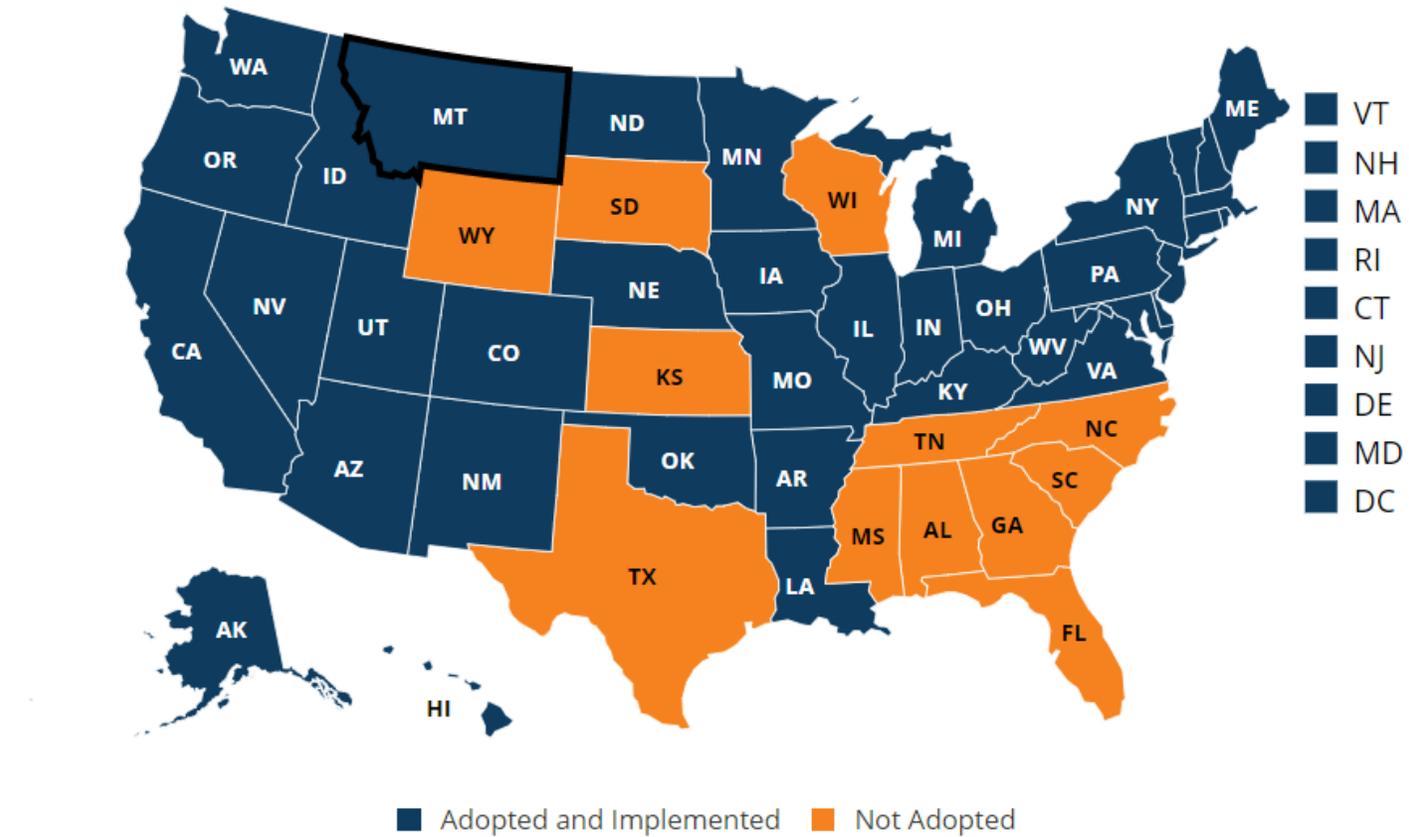
STATES THAT PASSED GUN SAFETY LAWS IN 2021



States that passed permitless carry



States and Medicaid expansion



How we can help

- Relevant ACP policy
- Prioritization based on ACP priorities, your assessment of your state's politics
- Tracking (we are investigating options)
- Action plans with links to state-specific data
- Addressing concerns from members

We are dedicating more staff and other resources to help you including the addition of Kory Stuer, Associate, State Health Policy and Advocacy. And of course Shuan!