Recap of ACP Leadership Day 5/21/2015

Nearly 300 ACP attendees - representing over 141,000 national members - met in Washington D.C. this year to lobby for ACP key policy positions. But before any lobbying commenced, members took a much deserved moment of celebration on the historic SGR repeal.

With strong bipartisan support (92-8 Senate, 392-37-4 House), H.R. 2 Medicare Access and CHIP Reauthorization Act (MACRA) permanently repealed the SGR, transitioning from an outdated GDP-linked and fee for service based funding mechanism to a value based reimbursement system.

Thank you to all Wisconsin Congressional Members who voted in favor of MACRA.


An additional thank you belongs to Bob Doherty and the ACP Washington DC office for their year-round efforts in lobbying for SGR repeal, and for their support, expertise, and leadership in organizing and instructing new ACP Leadership members on how to effectively lobby their Congressional members.

With the SGR issue resolved, ACP focused this year’s efforts on improving training and reimbursement for primary care via the following key policy issues.

• Medicare Primary Care Incentive Program (PCIP)
  • Affordable Care Act 2011 provided for a five year 10% Medicare bonus for designated primary care, which expires 1/2016.
  • ACP asked for introduction of legislation that would renew this primary care incentive.

• Medicaid Primary Care Pay Parity
  • Medicaid reimbursement is 0.59 cents on the Medicare dollar (0.40 cents in Wisconsin)
  • ACP asked members of Congress to co-sponsor Ensuring Access to Primary Care for Women & Children Act (S. 737) or (H.R. 2253) to improved Medicaid reimbursement to Medicare levels. (Tammy Baldwin is a co-sponsor in the Senate.)

• Graduate Medical Education (GME) Financing
  • GME levels capped in Balanced Budget Act 1996, funded exclusively through Medicare.
  • ACP concerned with future overall and particularly primary care physician shortage.
  • ACP asked for Congress to co-sponsor Creating Access to Residency Education (CARE) Act (H.R. 1117) to expand GME slots, improved primary care distribution, and expand funding source from Medicare to all-payers.

• Funding for Vital Federal Health Care Programs
  • ACP asked that current Title VII Health Professions Program which provides educations grants to primary care students and residents be funded to $71million for FY2016.
  • ACP asked that current National Health Service Corps scholarships be increased to its originally intended full capacity at $810 million.
• Supporting Public Health and Innovative Technologies
  • ACP supports work on emerging legislation *21st Century Cures*, specifically with an emphasis on reauthorizing funding for NIH and establishing the NIH innovation fund.

Presenting these policy requests for the state of Wisconsin was a diverse and effective team led by Gov. Dr. Mark Belknap and Dr. Kesavan Kutty. The Wisconsin contingent included numerous physicians from throughout the state, including Dr. Richard Dart, Dr. George Lange, Dr. Ravinder Vir, Dr. Noel Deep, and Dr. Don Lee, as well as resident physicians from the University of Wisconsin Dr. Abigail Bales and Dr. Richard Martin, and Medical College of Wisconsin student Lindsay Hammons.

Our contingent met personally with Sen. Baldwin and Rep. Pocan, as well as the health services policy staff for all remaining Congressional members listed above, and also Rep. Glenn Grothman and Rep. Jim Sensenbrenner. The conversations were positive, and we appreciate the time, interest, and concern showed by our representatives and their staff.

Progress in Washington can be slow (as evidenced by over a decade of lobbying and 16 temporary SGR patches before the eventual passage of MACRA), but with persistence from ACP lobbying efforts and the participation of so many members over the years, change is possible.

Richard Martin, MD, MPH
PG2 University of Wisconsin Hospital and Clinics

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http://www.house.gov/representatives/
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