



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.

Strengthening THCGME Remains a Top Priority for Family Physicians

Why it matters: We need more family physicians, and we need them practicing in areas that need them the most. Often, family physicians are the sole physicians providing care in their communities, especially in rural or underserved areas, and can adapt their care to fit the unique needs of these communities. However, underinvestment in primary care and maldistribution of the health care workforce contribute to care inequity and health disparities.

The Teaching Health Center Graduate Medical Education (THCGME) program, which to date has trained more than 1,730 primary care physicians and dentists, helps ensure that graduates are more likely to continue practicing primary care medicine and serving in medically underserved communities than those in Medicare GME – supported programs.

What we're working on:

- The AAFP [supports the bipartisan Lower Costs, More Transparency Act](#), which would extend the THCGME program for an unprecedented seven years. We [applauded](#) the House for passing this critical legislation on December 11 and urge the Senate to swiftly pass this bill.
- Additionally, we supported elements of the bipartisan Primary Care and Health Workforce Act. This legislation includes language that increases THCGME annual funding from \$127 million to \$300 million over the next five years. The AAFP also pressed for support of Sen. Casey's amendment which increases the THCGME per-resident allocation by \$10,000 per year each year from 2024-2028.

SUPPORT Reauthorization Act Ensures Family Physicians Can Provide Necessary SUD Care

Why it matters: Family physicians provide comprehensive mental and behavioral health services every day. They play a crucial role in safe pain management prescribing practices, screening patients for opioid use disorder (OUD), and prescribing and maintaining treatment of medications for OUD. Additionally, primary care physicians are often the first point of care for patients and can provide necessary referrals or coordinate care with psychiatric and other mental health professionals when needed.

What we're working on:

- The AAFP [wrote to Congress](#) expressing strong support for the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Reauthorization Act (S. 3393), which includes a technical fix to ensure that trained family physicians can continue to provide necessary care, including substance use disorder treatment.
- The AAFP applauds the House for passing their version of this critical legislation (H.R. 4531) on December 12. We thank the Senate HELP Committee for passing S. 3393 out of Committee and urge the Senate to take up a floor vote as soon as possible to ensure swift enactment of these important provisions.

AAFP endorses Legislation to Address Medicare Physician Payment

Why it matters: Family physicians provide high-quality care to our patients and our communities, but inadequate Medicare and Medicaid payment rates strain physician practices and create barriers to care for beneficiaries. Medicare physician payment rates have failed to keep up with the cost of inflation and have become increasingly insufficient, placing significant strain on physicians and their practices and creating barriers to care for beneficiaries.

What we're working on:

- This month, the AAFP has endorsed two pieces of legislation that would improve Medicare payment for family physicians.
- The AAFP [submitted](#) a letter in support of the Physician Fee Schedule Update and Improvements Act (H.R. 6545). This bipartisan legislation addresses several issues with Medicare physician payment.
 - Notably, it would increase the statutorily provided relief from Medicare physician payment cuts for 2024 from 1.25% to 2.5%. It would also make incremental reforms to existing budget neutrality requirements, which currently undermine positive policy changes and hamstring CMS' ability to appropriately pay for all the services a beneficiary needs.
 - The legislation also provides a one-year extension of the advanced alternative payment model incentive payment and the work Geographic Practice Cost Index (GPCI) floor, which is currently set to expire on January 20.
 - The Academy applauds the House Energy and Commerce Committee for unanimously passing this bill earlier this month.

- The Preserving Seniors' Access to Physicians Act of 2023 (H.R. 6683) would eliminate the 3.37% Medicare cut for physicians that goes into effect on January 1. It also aligns with the AAFP's recent advocacy efforts calling on Congress to avert the full Medicare payment cuts without delaying implementation of G2211.

Family Medicine's Year of Big Moves



This was a milestone year for family medicine. Learn how the AAFP joined family physicians to roll up our sleeves and work to improve health care for patients, practices, and communities. We're wrapping up 2023 by highlighting some of the major wins we accomplished. Read more at aafp.org/review2023.

Family Physicians Respond to FDA Tobacco Rule Delay

“The AAFP is disappointed that regulations to ban menthol cigarettes and flavored cigars will not be finalized in 2023. The AAFP has long supported measures to reduce the availability of flavored tobacco products to help prevent tobacco use, which remains the leading cause of preventable disease and death in the U.S. Family physicians will continue to help educate patients and communities about the risks of tobacco use and help patients stop smoking. We urge the administration to remove these products from the market.”

– Steven P. Furr, MD, FAAFP
President, American Academy of Family Physicians



Why it matters: There is clear evidence that flavored tobacco products, including menthol, are particularly addictive for young people and have been disproportionately marketed toward communities of color. Family physicians know that eliminating menthol cigarettes will save lives by preventing young people from starting to smoke and promoting health equity among disproportionately impacted communities.

What we're working on:

- AAFP President Steve Furr, M.D., FAAFP, expressed concern over the U.S. Food and Drug Administration's decision to delay final rules to ban menthol cigarettes and flavored cigars.
- The AAFP continues to work with policymakers and health care leaders to reduce the use of all tobacco products, including e-cigarettes, and prevent nonsmokers from starting to smoke.
- CDC data show that 70% of smokers want to quit; family physicians are key to ensuring that patients can access smoking cessation treatment and helping educate patients about the risks of tobacco use.

What We're Reading

- AAFP board member Karen Smith, M.D., FAAFP, spoke to *National Journal's* Erin Durkin about how the skyrocketing number of cases of congenital syphilis highlights the need for preventive care from a family physician, and about the health policy and equity impacts of this problem. Read it [here](#).

- Areas of Missouri and Kansas, as well as throughout the U.S., lack primary care doctors. How can medical schools help? AAFP board member Russell Kohl, M.D., FAAFP, addressed this question with NPR affiliate KCUR. Read it [here](#).
- “Vaccinations don’t just help kids and families; they improve community health outcomes overall,” said AAFP board member Kisha Davis, M.D., FAAFP in an interview with KERA, NPR’s Dallas affiliate. Read it [here](#).

For the latest policy updates impacting family medicine, follow us at [@aafp_advocacy](#).



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About American Academy of Family Physicians

Founded in 1947, the AAFP represents 129,600 physicians and medical students nationwide. It is the largest medical society devoted solely to primary care. Family physicians conduct approximately one in five office visits — that’s 192 million visits annually or 48 percent more than the next most visited medical specialty. Today, family physicians provide more care for America’s underserved and rural populations than any other medical specialty. Family medicine’s cornerstone is an ongoing, personal patient-physician relationship focused on integrated care. To learn more about the specialty of family medicine and the AAFP’s positions on issues and clinical care, visit www.aafp.org. For information about health care, health conditions, and wellness, please visit the AAFP’s consumer website, www.familydoctor.org.