

The Medical Association is on call for you.

2018 State Agenda

The Medical Association Board of Censors has met and approved the Association's 2018 State and Federal Agendas. These agendas were developed with guidance from the House of Delegates and input from individual physicians. As the Alabama Legislature and U.S. Congress begin their work for 2018, additional items affecting physicians, medical practices and patients may be added to this list.

The Medical Association **supports:**

- Ensuring legislation "first do[es] no harm"
- Extending the Medicaid payment bump for primary care to all specialties of medicine
- Eliminating the health insurance-coverage gap for the working poor
- Ensuring fair payment for patient care and reducing administrative burdens on physicians and medical practices
- Strengthening existing tort reforms and ensuring liability system stability
- Empowering patients and their doctors in making medical decisions
- Continued physician compounding, dispensing of drugs
- The same standards and reimbursements for telehealth and face-to-face visits
- Training, education and licensing transparency of all individuals involved in patient care
- Continued self-regulation of medicine over all areas of patient care
- Increased state funding to upgrade the Prescription Drug Monitoring Program to a useful tool for physician monitoring patients at risk for drug interactions and overdose potential
- Using data analytics to combat the drug abuse epidemic by strengthening research capabilities of pre-approved, de-identified prescription information
- Maintaining the Alabama Department of Public Health as the repository for PDMP information to ensure continuity for prescribers and dispensers and security for patients

- Standard opioid education in medical school so the physicians of tomorrow are prepared to face the realities and responsibilities of opioid prescribing

The Medical Association **opposes:**

- The radical Patient Compensation System legislation
- Legislation/initiatives increasing lawsuits against physicians
- Non-physicians setting standards for medical care delivery
- Tax increases disproportionately affecting physicians
- Expanding access to the Prescription Drug Monitoring Program (PDMP) for law enforcement
- Statutory requirements for mandatory PDMP checks
- Further expansion of Maintenance of Certification (MOC) requirements
- Changes to workers' compensation laws negatively affecting treatment of injured workers and medical practices
- Any scope of practice expansions that endanger patients or reduces quality of care
- Biologic substitution legislation that allows lower standards in Alabama than those set by the FDA that doesn't provide immediate notifications to patients and their physicians when a biologic is substituted, and that increases administrative burdens on physicians and medical practices

The Medical Association is on call for you.

2018 Federal Agenda

The Medical Association Board of Censors has met and approved the Association's 2018 State and Federal Agendas. These agendas were developed with guidance from the House of Delegates and input from individual physicians. As the Alabama Legislature and U.S. Congress begin their work for 2018, additional items affecting physicians, medical practices and patients may be added to this list.

The Medical Association *supports*:

- Meaningful tort reforms that maintain existing state protections
- Reducing administrative and regulatory burdens on physicians and medical practices
- Repeal of the Affordable Care Act and replacement with a system that:
 - Includes meaningful tort reforms that maintain existing state protections
 - Preserves employer-based health insurance
 - Protects coverage for patients with pre-existing conditions
 - Protects coverage for dependents under age 26
 - With proper oversight, allows the sale of health insurance across state lines
 - Allows for deducting individual health insurance expenses on tax returns
 - Increases allowed contributions to health savings accounts
 - Ensures access for vulnerable populations
 - Ensures universal, catastrophic coverage
 - Does not increase uncompensated care
 - Does not require adherence with insurance requirements until insurance reimbursement begins
 - Reduces administrative and regulatory burdens
- Overhauling federal fraud and abuse programs
- Reforming the RAC program

- Prescription drug abuse education, prevention and treatment initiatives
- Allowing patient private contracting in Medicare
- Expanding veterans' access to non-VA physicians
- Reducing escalating prescription drug costs
- A patient-centered MACRA framework, including non-punitive and flexible implementation of new MIPS, PQRS and MU requirements
- Congressional reauthorization of CHIP (Children's Health Insurance Program) at the current enhanced funding level
- Better interstate PDMP connectivity
- Eliminating "pain" as the fifth vital sign
- Repealing the "language interpreters" rule
- Requiring all VA facilities, methadone clinics and suboxone clinics to input prescription data into state PDMPs where they are located

The Medical Association *opposes*:

- Non-physicians setting standards for medical care delivery
- Publication of Medicare physician payment data
- National medical licensure that supersedes state licensure
- Legislation/initiatives increasing lawsuits against physicians