

REPORT OF THE TENNESSEE DELEGATION TO THE AMA

May 17, 2025

TO: HOUSE OF DELEGATES
TENNESSEE MEDICAL ASSOCIATION

SUBMITTED BY: RICHARD J. DEBERSIO, MD, CHAIR

1 As chairman of the Tennessee Delegation to the American Medical Association (AMA), it is my honor
2 to report to you on the activities of the AMA and of our delegation for 2024.

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4 **Tennessee Delegation**

5 Your delegation to the AMA participated in two meeting of the AMA House of Delegates, as
6 customary. We continue to be engaged with the Southeast Delegation which provides us with greater
7 opportunity in selection of AMA leaders and the ability to testify on resolutions seeking final policy
8 structure that represents the physicians of Tennessee.

- 9
- 10 • Tennessee introduced two resolutions in 2024
 - 11 ○ Boarding of patients in emergency departments (adopted as amended)
 - 12 ○ Physician compensation for managing portal messages (reaffirmed current policy in
 - 13 lieu of, meaning the reference committee believes intent is covered by current
 - 14 policy)
 - 15 • Dr. Appareddy continues service on the AMA Council on Legislation and is a member of its
 - 16 executive committee.
 - 17 • Dr. Trey Lee was selected to serve on the board of AMPAC, AMA's political action committee.
 - 18 • Dr. Nita Shumaker was elected into leadership of the Organized Medical Staff Section and
 - 19 serves as its alternate delegate, although she continues to caucus with us. Her appointment
 - 20 leaves Tennessee with seven representatives to cover the eight reference committees held
 - 21 and fill the six delegate voting positions.
 - 22 • 2025 will mark the end of service on the delegation for Dr. Richard DePersio, having served
 - 23 for 16 years on the delegation. This transition leaves our delegation in need of new members
 - 24 to represent the physicians of Tennessee.

25 **AMA Priority Areas**

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27 **Medicare Payment**

28 The American Medical Association is actively working to address the ongoing Medicare payment cuts
29 affecting physicians. Here's an overview of their recent efforts:

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31 **Immediate Actions to Counteract 2025 Payment Cuts**

32 Advocacy for Legislation: The AMA, in collaboration with 90 other health organizations, has urged
33 Congress to pass the Medicare Patient Access and Practice Stabilization Act (H.R. 879). This bill seeks
34 to cancel the 2.83% Medicare payment cut scheduled for January 1, 2025, and provide a two percent
35 increase to help stabilize physician practices. Bipartisan Support: A bipartisan group of 41 senators
36 has called on congressional leaders to address the 2.83% cuts and develop long-term solutions,

including reforms to the Medicare Access and CHIP Reauthorization Act (MACRA) and payment updates reflecting inflationary pressures.

Long-Term Reform Initiatives

Strengthening Medicare for Patients and Providers Act (H.R. 2474): The AMA supports this bipartisan bill, which proposes annual Medicare payment updates tied to the Medicare Economic Index (MEI), reflecting the increasing cost of delivering patient care.

Provider Reimbursement Stability Act: This proposed legislation aims to reform the Medicare payment schedule's budget-neutrality policies, requiring the Centers for Medicare & Medicaid Services (CMS) to reconcile inaccurate utilization projections based on actual claims and prospectively revise the conversion factor accordingly.

Replacement of Merit-based Incentive Payment System (MIPS): The AMA advocates for replacing MIPS with a more sustainable approach, the "Data-Driven Performance Payment System," which would provide annual payment updates and incentivize CMS to share data with physicians.

Ongoing Advocacy and Awareness Campaigns

FixMedicareNow.org: The AMA has launched this platform to raise awareness about the unsustainable Medicare payment system, allowing physicians and patients to share their stories and contact their members of Congress to advocate for necessary reforms.

Collaborations with Medical Societies: The AMA continues to work closely with state and national medical societies to coordinate efforts and amplify their message to Congress, emphasizing the need for comprehensive Medicare payment reform.

Vaccines

Combating Vaccine Misinformation

The AMA has been vocal about the dangers of vaccine misinformation, particularly on social media platforms. They have urged tech companies like Amazon, Facebook, Google, Pinterest, Twitter, and YouTube to take stronger actions against the spread of false information about vaccines. In a letter to these companies, the AMA emphasized the importance of providing users with accurate, scientifically sound information to help prevent the resurgence of vaccine-preventable diseases like measles.

Additionally, the AMA has collaborated with other medical organizations in filing an amicus brief with the U.S. Supreme Court, asserting that the government has a compelling interest in combating vaccine misinformation to protect public health.

Supporting Vaccine Safety and Efficacy

The AMA continues to support the overwhelming evidence that vaccines are among the most effective and safest interventions to prevent individual illness and protect public health. They have expressed concerns about proposals to create new commissions on vaccine safety, arguing that such actions could cause unnecessary confusion and adversely impact public trust in immunization practices.

To further promote vaccine safety, the AMA has partnered with the National Academies of Sciences, Engineering, and Medicine to create a website displaying evidence supporting the safety of vaccines. This initiative aims to counteract misinformation and reinforce public confidence in immunization.

Addressing Declining Vaccination Rates

The AMA is concerned about declining vaccination rates, particularly among kindergarteners. Factors contributing to this decline include missed well-child visits, school closures during the pandemic, and the spread of anti-vaccine beliefs. The AMA emphasizes the importance of providing accurate, scientific information to counteract misinformation and restore trust in vaccines.

Prior Authorizations

Federal Reforms: In January 2024, the Centers for Medicare & Medicaid Services (CMS) implemented a final rule that mandates health insurers to support an electronic prior authorization process integrated within physicians' electronic health records. This change is expected to save physician practices an estimated \$15 billion over the next decade by reducing administrative burdens and expediting care delivery. The rule also requires insurers to provide specific denial reasons, public reporting of program metrics, and access to prior authorization information for patients, enhancing transparency and accountability.

State-Level Initiatives: The AMA has developed model legislation to assist state medical societies in advocating for physician assistant (PA) reforms. As of early 2024, more than 70 PA reform bills were introduced across 28 states, with over 17 states having already adopted comprehensive reforms based on AMA's model legislation.

Policy Development and Industry Collaboration

The AMA has established comprehensive reform principles and engaged in collaborative efforts with various stakeholders:

Reform Principles: A workgroup convened by the AMA, comprising 17 state and specialty medical societies, national provider associations, and patient representatives, developed 21 reform principles addressing areas such as clinical validity, transparency, and administrative efficiency. These principles aim to guide the development of more effective and patient-centered PA processes.

Consensus Statement: The AMA collaborated with organizations like the American Hospital Association, America's Health Insurance Plans, and the BlueCross BlueShield Association to create a Consensus Statement on Improving the Prior Authorization Process. This statement outlines shared goals and commitments to reduce PA burdens and improve care delivery.

Legal Accountability and Transparency

The AMA is advocating for increased legal accountability for insurers and enhanced transparency in the PA process. The AMA supports policies that hold health insurers accountable when PA practices harm patients by delaying or denying medically necessary care. This includes opposing clauses in beneficiary contracts that may limit legal recourse through pre-dispute arbitration or class action waivers.

Transparency: To combat opaque and inconsistent denial processes, the AMA is working to ensure that insurers provide detailed explanations for PA denials, including the rationale, cited policies, information needed for approval, and lists of covered alternative treatments. Additionally, the AMA

supports the use of real-time prescription benefit tools to provide physicians with immediate access to patient drug coverage information at the point of care.

Patient Privacy and HIPAA

Recognizing the evolving landscape of digital health, the AMA has developed a Health Data Privacy Framework to address concerns about the use and sharing of patient data beyond HIPAA-covered entities. Key components include:

Privacy Principles: Guidelines emphasizing individual rights, equity, entity responsibility, applicability, and enforcement.

Patient Empowerment: Advocacy for policies that provide patients with meaningful control over their health data.

Transparency in Data Use: Recommendations for clear disclosures regarding how health information is accessed and utilized.

Advocacy for Stronger Data Privacy Legislation

In response to growing concerns about data privacy, the AMA has issued new privacy principles advocating for:

- Individual Control: Ensuring patients have the right to control, access, and delete their personal health data.

- Corporate Responsibility: Holding entities accountable for the use and protection of health information.

- Federal Enforcement: Strengthening enforcement mechanisms to uphold privacy standards.

Addressing Privacy in Digital Health Technologies

The AMA has expressed concerns about the lack of privacy safeguards in many digital health technologies, such as mobile health apps and wearable devices. To address these issues, the AMA:

- Advocates for Transparency: Calls for clear disclosures regarding how health data is collected, used, and shared by digital health technologies.
- Encourages Privacy-Forward Development: Provides guidance for app developers to implement privacy-by-design principles.
- Supports Regulatory Oversight: Urges policymakers to establish and enforce privacy standards for digital health technologies.

Physician Health and Wellbeing

Confidentiality Protections: The AMA has spearheaded a national campaign to enact laws protecting physicians seeking wellness care. This includes advocating for the removal of stigmatizing questions about mental health from medical licensure and credentialing applications. As a result, 34 medical licensure boards and over 500 hospitals have updated their forms to support physician wellness.

Dr. Lorna Breen Health Care Provider Protection Act: The AMA supports the reauthorization of this act, which provides funding for mental health programs and initiatives aimed at reducing burnout among healthcare providers.

1 Burnout Research: The AMA conducts and supports research to understand the causes and impacts
2 of physician burnout. This includes studies on the effectiveness of various interventions and the
3 development of tools like the Mini-Z Burnout Survey to assess organizational burnout levels.

4
5 Practice Transformation: The AMA's STEPS Forward® program offers evidence-based strategies to
6 improve practice efficiency and reduce burnout. These include team-based care models, workflow
7 redesigns, and the use of scribe support to alleviate documentation burdens.

8 9 System-Level Interventions

10 Organizational Biopsy®: This tool helps healthcare organizations assess their culture and identify
11 areas for improvement in physician well-being. It provides actionable insights to create a healthier
12 work environment.

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14 Joy in Medicine™ Health System Recognition Program: This program honors healthcare organizations
15 that demonstrate a commitment to reducing burnout and enhancing physician satisfaction through
16 leadership, teamwork, and supportive policies.

17
18 Continuing Medical Education (CME) Courses: The AMA offers CME courses focused on physician
19 wellness and burnout prevention. These courses provide strategies for redesigning practice
20 environments to promote well-being.

21 22 Impact and Progress

23 Improved Burnout Rates: Recent surveys indicate that physician burnout rates have decreased to
24 below 50% for the first time since the COVID-19 pandemic, reflecting the positive impact of these
25 initiatives.

26 27 **Scope of Practice**

28 Advocacy and Legislative Actions

29 State-Level Successes: In 2024, the AMA collaborated with at least 40 state medical associations and
30 national specialty societies to help defeat over 80 scope-of-practice bills. These bills sought to expand
31 the roles of nurse practitioners, pharmacists, optometrists, psychologists, and other nonphysicians
32 in ways that could compromise patient safety.

33
34 Federal-Level Engagement: The AMA has actively opposed federal legislation that would expand the
35 scope of practice for nonphysicians in Medicare and other federal health care programs. This includes
36 opposing bills that would allow pharmacists to independently diagnose and prescribe medications,
37 and that would expand Medicare coverage for services furnished by chiropractors beyond the
38 manual manipulation of the spine.

39
40 Scope of Practice Partnership (SOPP): The AMA leads the SOPP, which comprises 105 national, state,
41 and specialty medical associations. Since its inception, the SOPP has awarded more than \$4.0 million
42 in grants to support state medical association and specialty society efforts in opposing inappropriate
43 scope expansions.

- 44
45 • Model legislation and legislative templates on key issues related to scope of practice and
46 transparency in health care.

- 1 • Fifty-state law analyses showing the legal landscape around scope of practice as related to
2 multiple nonphysician practitioners.
3
- 4 • Comprehensive modules explaining the differences in education and training received by
5 physicians and various nonphysicians.
6
- 7 • Issue briefs to inform lawmakers on important scope of practice matters.
8
- 9 • Surveys to demonstrate the patient perspective on scope expansions.
10
- 11 • Over 6,000 workforce maps and the interactive Health Workforce Mapper, which
12 demonstrate that expanding scope of practice does not equal expanding access to care.
13

14 Truth in Advertising Campaign: The AMA launched the Truth in Advertising campaign to ensure that
15 patients are clearly informed about the qualifications and training of their healthcare providers. This
16 initiative aims to empower patients to make informed decisions about their care.
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18 American Medical Association
19

20 Data-Driven Advocacy

21 Health Workforce Mapper: The AMA's Health Workforce Mapper is a customizable, interactive tool
22 that illustrates the geographic distribution of the healthcare workforce. These maps show that the
23 promises made of "solving access problems," made by nonphysician provider advocates, fall flat.
24

25 **Use of Artificial Intelligence (AI) by insurance**

26 The American Medical Association is actively addressing the use of AI by health insurance companies,
27 particularly concerning its application in prior authorization processes.
28

29 The AMA has expressed significant concerns about the increasing reliance on AI by insurers for
30 reviewing patient claims and prior authorization requests. A survey revealed that 61% of physicians
31 fear that unregulated AI is leading to more prior authorization denials, overriding medical judgment
32 and potentially harming patients.
33

34 In response, the AMA has adopted policies advocating for greater regulatory oversight of AI in these
35 processes. These policies emphasize the need for:

- 36 • Clinical Criteria: Decisions should be based on accurate and up-to-date clinical guidelines.
- 37 • Human Oversight: Reviews should involve healthcare professionals with relevant expertise
38 who are not incentivized to deny care.
- 39 • Transparency: Clear disclosure of AI's role in decision-making to both physicians and patients.
40

41 Legislative and Regulatory Advocacy

42 The AMA is also engaging with policymakers to ensure that AI applications in healthcare are ethical
43 and patient-centered. For instance, Connecticut Senator Saud Anwar proposed a bill to restrict
44 insurers' use of AI in determining patient care, following reports of mass claim denials by Cigna using
45 AI algorithms.

1 Additionally, the AMA is collaborating with other medical organizations to advocate for legislation
2 that mandates human review of AI-generated decisions and ensures that AI tools are used
3 responsibly in healthcare settings.

4

5 AMA's Broader AI Oversight Framework

6 Beyond prior authorization, the AMA has developed a comprehensive framework for the oversight
7 of AI in healthcare. This includes guidelines on:

- 8 • Data Privacy and Cybersecurity: Ensuring that patient data is protected in AI applications.
- 9 • Physician Liability: Clarifying responsibilities when AI tools are used in clinical decision-
10 making.
- 11 • Generative AI Policies: Addressing the use of AI in creating medical content and its
12 implications.

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14 Through these initiatives, the AMA aims to ensure that AI serves as a tool to enhance, rather than
15 hinder, patient care, and that its use in insurance practices is transparent, ethical, and subject to
16 appropriate oversight.

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18 **New AMA CEO**

19 Dr. James Madera has served as AMA CEO since 2011 and announced his retirement in June 2025.

20 We expect that the new CEO-elect will be selected and introduced at the AMA Annual Meeting this
21 June.

Respectfully submitted,
Richard J. DePersio, MD, Chair

2024 Tennessee Delegation to the AMA

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