

# AAFP News: AFP Edition

## *Policy and Health Issues in the News*

### **Medical Schools Challenged by Increasing Shortage of Clinical Training Sites**

What appears to be solid progress toward building an adequate U.S. health care workforce could be derailed by an escalating shortage of clinical training sites to accommodate many of those learners, according to a joint report of the American Association of Colleges of Nursing, the American Association of Colleges of Osteopathic Medicine, the Association of American Medical Colleges, and the Physician Assistant Education Association. The authors attribute the shortage, in part, to the opening of new allopathic and osteopathic medical schools, the expansion of existing schools, and larger class sizes. They also pointed to an explosion in the number of training programs for nurse practitioners and physician assistants, as well as a growing number of Caribbean-based medical schools seeking U.S. training experiences for their students. For more information, go to <http://www.aafp.org/news/education-professional-development/20140706preceptstudy.html>.

### **Report Urges Collaboration Between Physicians, Patients**

A new report issued by the Josiah Macy Jr. Foundation calls on physicians, health care professionals, and educators to welcome patients and their families as full and equal partners in health care. The report, "Partnering with Patients, Families, and Communities: An Urgent Imperative for Health Care," highlights four broad recommendations crafted by participants at a conference convened by the Macy Foundation in early April, and identifies specific implementation steps. Specifically, the report urged those responsible for reforming and improving the nation's health care system to do the following: change the content and conduct of health professions education to graduate physicians and other health care professionals who are willing and able to partner with patients, families, and communities; transform health professions education and health care organizations to facilitate durable partnerships with patients, families, and communities; build the capacity for partnerships among patients, families, communities, and health professions education and health care organizations; and facilitate regulatory and payment reforms that require, support, and sustain partnerships among all of those groups. For more information, go to <http://www.aafp.org/news/practice-professional-issues/20140625macyrpt-patpartners.html>.

### **MedPAC Proposes New Medicare Payment for Primary Care Physicians**

The Medicare Payment Advisory Commission (MedPAC) is proposing another small step toward offering real alternatives to the strictly fee-for-service payment model. The commission, which advises Congress on Medicare issues, recently outlined several proposals that reward physicians for keeping patients healthy rather than treating them when they are sick. Among the proposals is a monthly payment of \$2.60 per patient. Based on that figure, the average eligible physician could receive about \$3,900 in additional Medicare payments per year. Although the commission acknowledged that the figure is modest, Medicare is not the only payer providing incentive payments on a per-patient basis. Medicare and private insurers are gradually introducing new payment models that encourage physicians to establish ongoing relationships with patients rather than relying exclusively on one-time office visits. For more information, go to <http://www.aafp.org/news/government-medicine/20140625medpactestimony.html>.

### **Medical Groups Move to Preempt Exemption for Cigars in Proposed FDA Rule**

The American Academy of Family Physicians recently signed on to a letter to the House Committee on Appropriations opposing any amendment to a funding bill for the U.S. Food and Drug Administration (FDA) that would exempt cigars from the agency's proposed tobacco deeming rule. The letter, which was crafted by the Campaign for Tobacco-Free Kids and signed by more than 30 medical organizations, said that an amendment to exclude certain types of cigars would prevent the FDA from implementing rules such as requiring manufacturers to report what ingredients are contained in their products. The letter pointed out that although the health risks of cigar smoking do not mirror those of cigarette smoking, cigar smoke is composed of the same toxic and carcinogenic components found in cigarette smoke. After beginning debate on the bill on June 11, House Majority Leader Eric Cantor, R-Va., put consideration of the measure on hold; debate may resume later this summer. For more information, go to <http://www.aafp.org/news/government-medicine/20140617fdaletters.html>.

— AAFP AND AAFP NEWS STAFF

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