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 **AAFP News: AFP Edition**

*Policy and Health Issues in the News*

### **AAFP Delegates Address Violence in Health Care, Homelessness**

Delegates to the American Academy of Family Physicians' (AAFP's) 2017 Congress of Delegates recently addressed a number of issues, including violence in health care, using so-called Housing First approaches to aid homeless persons, and treating opioid abuse in incarcerated populations. The delegates adopted a resolution calling on the AAFP to survey members to quantify and characterize instances of violence against family physicians in the workplace and elsewhere related to medical practice. The measure also asked the AAFP to create and promote an educational toolkit on violence in the workplace, including training on deescalating confrontations, dealing with an active shooter, and how to promote metal detectors. Another measure delegates adopted asked the AAFP to advocate for policies supporting so-called Housing First approaches to aiding homeless persons, including those that encourage Medicaid agencies and Medicaid health plans to use funds specifically for this purpose. The U.S. Interagency Council on Homelessness defines Housing First as an approach in which persons experiencing homelessness are offered permanent housing with few or no treatment preconditions, behavioral contingencies, or barriers. Delegates also adopted a resolution that focused on treating opioid use disorder in incarcerated populations. The measure tasked the AAFP with advocating for legislation, standards, policies, and related funding to increase access at correctional facilities to evidence-based treatment for opioid use disorder, including medication-assisted treatment. The resolution also called for correctional facilities to collaborate with community resources (e.g., addiction treatment providers, case managers, social workers, pharmacies) to support postincarceration treatment plans. Additionally, delegates adopted measures that called on the AAFP to oppose legislation allowing insurers to opt out of maternity and reproductive health coverage; to advocate that Congress pass legislation making it illegal for military commissaries to sell tobacco products to those younger than 21 years; to advocate against justice system officials' policies and practices of incentivizing defendants to seek family planning services such as sterilization and contraception; and to issue a statement opposing the Trump administration's policy banning transgender persons from serving in the U.S. armed forces. For more information, go to <http://www.aafp.org/news/2017-congress-fmx/20170918cod-hops.html>.

### **MedPAC Debates Expansion of Payments for Telehealth Services**

The Medicare Payment Advisory Commission (MedPAC) recently discussed how expanding payment for telehealth services could increase access for patients, as well as potentially increase claims without leading to a measurable improvement in patient health. The commission is required to submit a report to Congress by March detailing telehealth services covered by Medicare and private plans. In preparation, its members discussed whether payment for these services could be expanded efficiently. Medicare is more limited in how it can pay for telehealth services compared with other payers. Most health plans from Medicaid, the Department of Defense, and the Department of Veterans Affairs cover telehealth, and 34 states have passed laws that require insurers to pay for telehealth visits in the same manner as they pay for office visits. Commissioners grappled with the question of whether telehealth will become a substitute for office visits with the potential to reduce overall costs, or simply lead to more billing of extra medical services. For more information, go to <http://www.aafp.org/news/government-medicine/20170919medpactelehealth.html>.

### **HHS Asked to Act on Information Blocking**

Because information blocking between different health information technology (IT) systems may endanger patients, several groups, including the AAFP, recently signed on to a joint letter seeking to lay the groundwork for a solution. The letter to the Department of Health and Human Services (HHS) and the agency's Office of the National Coordinator for Health IT notes that the 21st Century Cures Act prohibits information blocking and allows for penalties against vendors or others who violate the prohibition by, for example, charging a fee to exchange information or simply refusing to share it. Although some large health systems cite patient privacy as a reason for not sharing data, the Health Insurance Portability and Accountability Act explicitly permits the disclosure of patient data to other health professionals. The letter spells out more than a dozen detailed questions that should be considered in a proposed rule on the topic. For more information, go to <http://www.aafp.org/news/government-medicine/20170908infoblocking.html>.

— AFP AND AAFP NEWS STAFF

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