



# AAFP News: *AFP* Edition

*Policy and Health Issues in the News*

## **AAFP Presses Congress to Protect Primary Care Program Funding**

As members of Congress prepare federal appropriations for 2017, the American Academy of Family Physicians (AAFP) is asking lawmakers not to cut funding for programs tied to primary care and public health initiatives. In a recent letter to leaders of both parties in the House and Senate, AAFP Board Chair Robert Wergin, MD, urged legislators to keep the government funded beyond the end of the federal government's fiscal year and outlined programs that should receive continued funding, such as the Agency for Healthcare Research and Quality and efforts to control the spread of Zika virus. Citing the continued emphasis on combating opioid abuse, Wergin pressed legislators to continue funding expansion of prescription drug monitoring programs in all states. For more information, go to <http://www.aafp.org/news/government-medicine/20160921budgetpriorities.html>.

## **AAFP Delegates Address Discrimination, Diversity, and Gun Violence**

Delegates to last month's annual AAFP Congress of Delegates addressed a number of health policy issues, including discrimination, social determinants of health, and gun violence. Members who participated in the Reference Committee on Health of the Public and Science hearing addressed topics such as discriminatory policing, xenophobia, and discrimination against members of the lesbian, gay, bisexual, and transgender community. Delegates adopted a new policy statement on discriminatory policing that is supported by the Department of Justice's 2015 *Final Report of the President's Task Force on 21st Century Policing*. The statement says the AAFP agrees with the recommendation that law enforcement agencies should adopt and enforce policies prohibiting profiling and discrimination based on race, ethnicity, national origin, religion, age, gender identity/expression, sexual orientation, immigration status, disability, housing status, occupation, or language fluency. The committee also asked the AAFP to establish an Office of Diversity that would serve as the official repository for policies and information related to discrimination, diversity, and cultural proficiency; support members in efforts toward nondiscrimination in education, training, and practice; communicate messages to members and the general public; and support the development and implementation of anti-discrimination and hate

crime laws, as well as public policies that protect victims of discrimination. For more information, go to <http://www.aafp.org/news/2016-congress-fmx/20160926codhops.html>.

## **New Scale Gauges Clinicians' Ability to Facilitate Patient Activation**

The results of a new study may help physicians take a more effective approach to motivating patients to change unhealthy habits. The study, recently published online by *Healthcare*, validated the results of a previous exploratory study that identified five promising strategies for supporting patient self-management: emphasizing patient ownership, partnering with patients, identifying small steps toward change, scheduling frequent follow-ups, and showing care and concern. Based on this study, researchers developed and validated a scale for measuring where primary care clinicians are in terms of patient self-management support. In the study, clinicians' scores on the scale exhibited "significant but modest associations with their patients' smoking cessation and weight loss (among obese patients)," researchers found. For more information, go to <http://www.aafp.org/news/health-of-the-public/20160920smsresearch.html>.

## **Number of Small Practices Continues to Drop**

A recent report found that the number of practices with nine or fewer physicians declined from 40% in 2013 to 35% in 2015. Over the same period, the number of practices with 100 or more physicians increased from 30% to 35%. Authors of the report, which was published in the September 2016 issue of *Health Affairs*, noted that because they analyzed information from Medicare's Physician Compare data set, their findings may not be representative of physicians who do not treat Medicare patients, such as many pediatricians and other subspecialists. The study found that in 2013, 22.5% of physicians overall were in one- or two-physician practices; two years later, that figure had dropped to 19.8%. The proportion of practices with three to nine physicians declined from 17.6% to 15.5% during the same period. For more information, go to <http://www.aafp.org/news/practice-professional-issues/20160919smallpractices.html>.

— AFP AND AAFP NEWS STAFF

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