
 **AAFP News: AAFP Edition**

Policy and Health Issues in the News

Physician Groups Warn Congress on AHCA

Before the Senate takes action on legislation that could affect millions of persons who recently obtained health insurance, six physician groups, including the American Academy of Family Physicians (AAFP), recently met with legislators and their staffs to raise a red flag about reducing access to care. The key message from the AAFP, the American Academy of Pediatrics, the American College of Physicians, the American Congress of Obstetricians and Gynecologists, the American Osteopathic Association, and the American Psychiatric Association is that the American Health Care Act (AHCA) contains fatal flaws that could reduce coverage for millions of individuals and substantially increase costs for others. An estimated 24 million persons will lose coverage within the next 10 years if the legislation is enacted, according to a report on an earlier version of the bill from the nonpartisan Congressional Budget Office. The organizations told senators that they will not support any legislation to repeal the Patient Protection and Affordable Care Act (ACA) that results in loss of coverage for persons who currently have insurance, reduces Medicaid eligibility, or triggers higher costs for older and sicker patients. For more information, go to <http://www.aafp.org/news/government-medicine/20170515hillmeetings.html>.

Despite Interest, Family Physicians Cite Barriers to Use of Telehealth

The use of telehealth remains limited among family physicians, some of whom report barriers to greater adoption, according to a recent survey by the Robert Graham Center for Policy Studies in Family Medicine and Primary Care. Researchers surveyed family physicians to find out how they are using telehealth services and what obstacles stand in the way of expanding use of those services. Results were published in the May-June issue of the *Journal of the American Board of Family Medicine*. Only 15% of the 1,557 family physician respondents said they used telehealth services in 2014, and many of those who used the technology did so infrequently. Among telehealth users, 55% used the technology for diagnosis or treatment. Other uses included chronic disease management (26%), follow-up (21%), obtaining second opinions (20%), and emergency care (16%). Physicians who used telehealth services were more likely to be located in a rural setting, to use electronic health records, and to work in a practice with no more than six family physicians. For more information, go to <http://www.aafp.org/news/practice-professional-issues/20170516rgctelehealth.html>.

Drop in Teaching Health Center Funding Affected Family Medicine Residencies

Building the primary care pipeline to bring family physicians where they are most needed will take time and money, and recent research suggests that federal funding of teaching health centers (THCs) is a key part of that support. Researchers at the Robert Graham Center for Policy Studies in Family Medicine and Primary Care found that a recent decline in federal funding precipitated a halt in the number of new THC family medicine residency programs. The study, which was published in the May-June issue of the *Journal of the American Board of Family Medicine*, detailed how initial funding for THC programs contributed to a steady increase in the number of family medicine residency slots. The THC Graduate Medical Education Program originally was a five-year initiative included in the ACA that was designed to train primary care residents and dentists to work in underserved areas outside of hospital-based residencies. The program contributed to the emergence of 11 new and 14 expanded THC family residency programs. Funding for THCs accounted for 33% of the increase in family medicine residency slots between 2011 and 2015, the authors found. The Medicare Access and CHIP Reauthorization Act of 2015 extended funding for THCs for two years, but funding per resident was reduced from \$150,000 to \$90,000. No new THCs have been funded since that time. For more information, go to <http://www.aafp.org/news/education-professional-development/20170518thcfunding.html>.

MEDWATCH: Newer Diabetes Drug Linked to Increased Amputation Risk

The U.S. Food and Drug Administration (FDA) recently directed that a new boxed warning be added to the package label of the medication canagliflozin (Invokana) to advise prescribers and patients of an increased risk of leg and foot amputations associated with the drug. The MedWatch alert was based on results of two large clinical trials that showed that leg and foot amputations occurred about twice as often in patients treated with the drug as in those who received a placebo. For more information, go to <http://www.aafp.org/news/health-of-the-public/20170522fdainvokana.html>.

— AAFP AND AAFP NEWS STAFF

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