

AAFP News: *AFP* Edition

Policy and Health Issues in the News

AAFP, ABFM Team Up to Launch Unified CME Reporting Process

The American Academy of Family Physicians (AAFP) and American Board of Family Medicine (ABFM) are teaming up to create a more seamless credit-reporting experience for family physicians. When the new process is implemented, members will be able to use the AAFP for all their continuing medical education (CME) credit reporting needs. In its role as one of the nation's three CME accrediting bodies, the AAFP works with CME provider organizations that wish to have their CME activities, such as performance improvement activities, certified for AAFP Prescribed and/or Elective credit. These CME providers can seek approval for those activities through the AAFP Credit System. The AAFP and ABFM are working together to allow CME providers to apply for AAFP Performance Improvement CME Credit and ABFM Certification Activity credit for their performance improvement activities through the AAFP Credit System using a single application process. Beginning in October, CME providers who apply for dual credit using the new unified process will no longer pay an additional fee for ABFM Certification Activity credit approval. For more information, go to <http://www.aafp.org/news/education-professional-development/20170710unifiedpicme.html>.

Physician House Members Raising Awareness About Physician Burnout

Amid growing concerns about physician burnout and its toll on the nation's physician workforce, one House member recently brought his medical colleagues together to raise awareness about the issue. Rep. Phil Roe, MD, R-Tenn., invited multiple physician organizations, including the AAFP, to discuss the consequences of the burnout crisis. In kicking off the meeting, Roe said legislators and the public are beginning to recognize the rising demands on the medical profession as older physicians enter retirement and a younger generation is worn down by a growing number of administrative tasks. Clif Knight, MD, AAFP senior vice president for education, said discussions with physicians and a review of survey data have revealed that the top sources of professional dissatisfaction are the regulatory and documentation burdens physicians struggle with. Another source of frustration is insurer demands that prior authorizations be obtained before certain services are provided. For more information, go to <http://www.aafp.org/news/government-medicine/20170627houseburnout.html>.

Free Online Tool Can Connect GME Programs, Save Family Medicine Slots

A new tool can help family medicine residency programs accredited by the American Osteopathic Association (AOA) in the move to a single graduate medical education (GME) accreditation system. Programs currently accredited solely by the AOA have until June 30, 2020, to meet accreditation standards of the Accreditation Council for Graduate Medical Education (ACGME) and retain their status as accredited residency programs. Rural and community-based osteopathic residencies are particularly vulnerable to transition challenges because of a lack of resources within their communities. The AAFP's Family Medicine Residency Explorer is a mapping tool designed to help create conversations between programs that are exploring or engaged in the accreditation process with currently accredited programs. For example, an ACGME program director could use the mapper to find nearby osteopathic programs and reach out to offer assistance. For more information, go to <http://www.aafp.org/news/education-professional-development/20170701residencyexplorer.html>.

Executive Summary Available to Inform Family Physicians About QPP Changes

The AAFP has created a two-page executive summary of the proposed rule outlining updates to the 2018 Quality Payment Program (QPP). Annual proposed updates are required by law, and the lengthy proposed rule was published in the *Federal Register* on June 30. The AAFP's summary comes in advance of what will be a far more detailed comment letter that will be submitted to the Centers for Medicare and Medicaid Services (CMS) Administrator Seema Verma, MPH, before the Aug. 21 comment deadline. CMS projects that approximately 134,000 physicians and other eligible clinicians or groups will be exempt from the Merit-based Incentive Payment System, in addition to the nearly 700,000 who were already exempt under the low-volume threshold established in the 2017 QPP final rule. The agency estimates that nearly one-half of the additional excluded physicians will be from small practices. For more information, go to <http://www.aafp.org/news/macra-ready/20170627qppsummary.html>.

— AAFP AND AAFP NEWS STAFF

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