



March 9, 2021

The Honorable Patty Murray  
Chairwoman  
Committee on Health, Education, Labor,  
and Pensions  
U.S. Senate  
Washington, D.C. 20510

The Honorable Richard Burr  
Ranking Member  
Committee on Health, Education, Labor  
and Pensions  
U.S. Senate  
Washington, D.C. 20510

Dear Chairwoman Murray and Ranking Member Burr,

On behalf of the American Academy of Family Physicians (AAFP) and the 136,700 family physicians and medical students we represent, I applaud the Health, Education, Labor and Pensions Committee for its continued focus on COVID-19 response. I write in response to the hearing: “Examining Our COVID-19 Response: An Update from the Frontlines” to share the family physician perspective and the AAFP’s policy recommendations for ensuring that our health care system can make a complete recovery from the ongoing COVID-19 pandemic.

Family physicians are on the frontlines of the COVID-19 pandemic screening, diagnosing, triaging and treating patients who are fighting the virus while continuing to provide comprehensive care to their patients with ongoing health care needs, including management of chronic conditions. They are keeping patients healthy and keeping them out of the hospital and emergency room while many of them have also provided surge staffing when hospitals have been overwhelmed. The COVID relief legislation that the Senate passed last week placed a heavy emphasis on testing, treatment and vaccines to control COVID-19 – primary care is the gateway to all three.

COVID-19 has highlighted the inefficiencies and inequities that already existed in our health care system. As the pandemic continues, individuals are struggling more than ever to access the essential primary health care services they need to stay healthy. Family physicians are committed to doing everything possible to prevent and slow the spread of COVID-19 while ensuring that patients get the care they need. However, they can’t do it alone; there are specific actions that the federal government should take now to support access to and coverage for COVID-19 treatment and prevention.

## Recommendations

- Equitable Vaccine Distribution - According to a recent survey, nearly nine in ten primary care clinicians want their practice to be a COVID-19 vaccination site, only 22 percent are considered as such by their health department, local hospital, or health system.<sup>1</sup> Additionally, independent practices have had a more difficult time obtaining COVID-19 vaccines for their patients than those affiliated with a hospital or large health system.<sup>2</sup> It is frustrating that primary care has been overlooked as an outlet for equitable vaccine distribution even though it is equipped to target those most vulnerable and in need.

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**While we do not believe legislation is needed to address this problem, we call on Congress to support federal, state, and local efforts to prioritize primary care practices in COVID-19 vaccine distribution.**

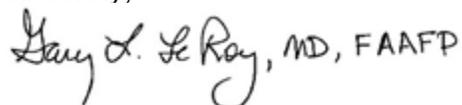
- Disparities in Vaccination Rates – Data indicate that Black and Hispanic adults under 50, as well as rural residents, are more likely to report vaccine hesitancy or indicate that they will not get the COVID-19 vaccine.<sup>3</sup> However, 85 percent of individuals across demographic groups report that their primary care physician or other clinician is the most trusted source of information about COVID-19 vaccines and they will rely on them when deciding whether to get the vaccine.<sup>4,5</sup> As trusted members of their communities and the primary source of comprehensive health services in rural and under resourced areas, community primary care physicians play an integral role in ensuring equitable vaccination rates across the state. According to data from the Medical Expenditure Panel Survey, primary care physicians provided 54 percent of all clinical visits for vaccinations, which made them more likely to administer vaccines than other stakeholders, such as pharmacies or grocery stores.<sup>6</sup> **As Congress considers policies to reduce the disparities in COVID-19 vaccine uptake, including investing in a national vaccine promotion campaign, it is important to recognize the role of primary care physicians in combating vaccine hesitancy.**
- Telehealth - Family physicians have rapidly changed the way they practice to meet the needs of their patients during the COVID-19 pandemic. About 70 percent report that they want to continue providing more telehealth services in the future. Telehealth can enhance patient-physician collaboration, increase access to care, improve health outcomes by enabling timely care interventions, and decrease costs when utilized as a component of, and coordinated with, continuous care. Given these benefits, patients and physicians alike have indicated that current telehealth flexibilities should continue beyond the public health emergency. **Congress should act to extend Medicare telehealth flexibilities and ensure telehealth is permanently recognized across payers as a valuable modality of providing primary care services beyond the public health emergency.**
- Primary Care Workforce - COVID-19 has both highlighted and exacerbated the physician workforce shortages facing communities throughout the nation. It has demonstrated the urgency of building and financing a robust, well-trained, and accessible primary care system in our country. According to the American Association of Medical Colleges, we will need 52,000 additional primary care physicians by 2025 in order to meet the health care needs of our growing and aging population and be prepared to respond to future crises.<sup>7</sup> **Congress should address the primary care physician shortage by increasing investments in the Teaching Health Center Graduate Medical Education (THCGME) program and the National Health Service Corps, which train and place primary care physicians in underserved and rural communities.**
- Mental Health of Physicians - Even prior to the pandemic, burnout among health providers was a pervasive public health concern, with some studies reporting burnout in more than 50 percent of clinicians. According to the American Board of Family Medicine, primary care physicians have experienced the highest rate of death (26.9%) among health provider specialties during COVID-19.<sup>8</sup> Physician burn out during the COVID-19 pandemic has become worse, negatively impacting happiness, relationships, career

satisfaction, and patient care. A January 2021 report showed that 47 percent of family physicians are burnt out, and 20 percent of all physicians are clinically depressed.<sup>9</sup> **Congress should invest in the mental health needs of our nation's doctors, particularly during the pandemic, and fight the stigma around seeking necessary treatment by passing the Dr. Lorna Breen Health Care Provider Protection Act.**

- **Personal Protective Equipment (PPE)** - Access to PPE has been a continual challenge for primary care providers during the pandemic. Survey data shows that 1 in 3 primary care practices are consistently having trouble getting PPE.<sup>10</sup> Family physicians are on the front lines screening, testing, and treating patients for COVID-19 in outpatient and inpatient settings, often at great personal risk. It is imperative during public health emergencies that health care workers have adequate protection to decrease personal harm and the spread of disease. **Congress should increase PPE production and stabilize the supply chain by passing legislation, such as the Protect our Heroes Act of 2020 and ensure that community-based primary care physicians are not excluded from PPE distributions from the Strategic National Stockpile.**
- **Inadequate Reimbursement for Testing** - Some primary care physicians report that payment rates for COVID-19 testing have dropped so significantly that they do not cover the cost of the COVID-19 testing supplies, and therefore jeopardizing access to a tool that is crucial to stopping the spread of COVID-19.<sup>11</sup> With new variants of coronavirus emerging, testing will be especially important. **Congress should address the inadequate reimbursement by clarifying that public and private payers must reimburse the complete cost of a COVID test.**
- **Medicaid Parity** - Recent data show that Medicaid enrollment has increased by more than 6 million since the start of the COVID-19 pandemic, and trends suggest that enrollment will continue to increase a result of pandemic-related job losses.<sup>12</sup> The demand for primary care physicians in the Medicaid program is more acute than ever. Inadequate Medicaid payment threatens access to primary care services in areas hardest hit by COVID-19, and without proper support during this public health emergency and beyond, family physician practices could be forced to close. **Congress should ensure Medicaid beneficiaries have timely access to primary care by raising Medicaid payments to at least Medicare payment levels.**

We thank you for your leadership and actions to date to help our nation combat COVID-19. The AAFP stands ready to partner with you on additional legislation to recover from the pandemic and improve our public health preparedness. Should you have any questions, please contact Erica Cischke, Senior Manager of Legislative and Regulatory Affairs at [ecischke@aafp.org](mailto:ecischke@aafp.org) or John Aguilar, Manager of Legislative Affairs at [jaquilar@aafp.org](mailto:jaquilar@aafp.org).

Sincerely,



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Board Chair  
American Academy of Family Physicians

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- <sup>1</sup> Larry A. Green Center. "Quick COVID-19 Primary Care Survey." Series 26 Fielded February 12-16, 2021. <https://static1.squarespace.com/static/5d7ff8184cf0e01e4566cb02/t/60368efc6f135d069645fa93/1614188285446/C19+Series+26+National+Executive+Summary.pdf>
- <sup>2</sup> Medical Group Management Association. [https://www.mgma.com/news-insights/press/nation%E2%80%99s-physician-practices-left-out-of-covid-19?utm\\_source=ga-organic-st-01.26.21&utm\\_medium=social&utm\\_campaign=ga-vaccine-press-release](https://www.mgma.com/news-insights/press/nation%E2%80%99s-physician-practices-left-out-of-covid-19?utm_source=ga-organic-st-01.26.21&utm_medium=social&utm_campaign=ga-vaccine-press-release)
- <sup>3</sup> Kaiser Family Foundation. KFF COVID-19 Vaccine Monitor. February 2021. Available at: <https://www.kff.org/coronavirus-covid-19/poll-finding/kff-covid-19-vaccine-monitor-february-2021/>
- <sup>4</sup> Kaiser Family Foundation. KFF COVID-19 Vaccine Monitor. December 2020. Available at: <https://www.kff.org/coronavirus-covid-19/report/kff-covid-19-vaccine-monitor-december-2020/>
- <sup>5</sup> Kaiser Family Foundation. KFF COVID-19 Vaccine Monitor. January 2021. Available at: <https://www.kff.org/report-section/kff-covid-19-vaccine-monitor-january-2021-vaccine-hesitancy/>
- <sup>6</sup> Analysis conducted by the Robert Graham Center. Publication forthcoming.
- <sup>7</sup> 1 Petterson, S. M., Liaw, W. R., Phillips, R. L., Jr, Rabin, D. L., Meyers, D. S., & Bazemore, A. W. (2012). Projecting US primary care physician workforce needs: 2010-2025. *Annals of family medicine*, 10(6), 503–509. <https://doi.org/10.1370/afm.1431>
- <sup>8</sup> Gouda D, Singh PM, Gouda P, Goudra B. An Overview of Health Care Worker Reported Deaths During the COVID-19 Pandemic. *J Am Board Fam Med*. 2021 Feb;34(Suppl):S244-S246. doi: 10.3122/jabfm.2021.S1.200248. PMID: 33622846.
- <sup>9</sup> Kane, L. (2021, January 22). 'Death by 1000 CUTS': Medscape National Physician Burnout and Suicide Report 2021. Retrieved March 05, 2021, from <https://www.medscape.com/slideshow/2021-lifestyle-burnout-6013456?faf=1#28>
- <sup>10</sup> Larry A. Green Center. "Quick COVID-19 Primary Care Survey." Series 20 Fielded September 4-8, 2020. <https://static1.squarespace.com/static/5d7ff8184cf0e01e4566cb02/t/5f6510dc99d76d706832ba29/1600458973290/C19+Series+20+National+Executive+Summary.pdf>
- <sup>11</sup> Kliff, S. (2021, February 03). Burned by Low Reimbursements, some doctors stop testing for Covid. Retrieved March 08, 2021, from <https://www.nytimes.com/2021/02/03/upshot/covid-testing-children-pediatricians.html>
- <sup>12</sup> Corallo, B., & Rudowitz, R. (2021, January 21). Analysis of recent national trends in Medicaid and CHIP Enrollment. Retrieved March 5, 2021, from <https://www.kff.org/coronavirus-covid-19/issue-brief/analysis-of-recent-national-trends-in-medicaid-and-chip-enrollment/>