

# AAFP News: AFP Edition

## *Policy and Health Issues in the News*

### **HHS Releases Proposed Rule for New Physician Payment Models**

The U.S. Department of Health and Human Services (HHS) recently released the much-anticipated proposed rule that will guide implementation of the Medicare Access and CHIP Reauthorization Act (MACRA). The rule, "Medicare Program: Merit-Based Incentive Payment System and Alternative Payment Model Incentive Under the Physician Fee Schedule, and Criteria for Physician-Focused Payment Models," has been posted for public review before publication in the May 9, 2016, *Federal Register*. For many months, family physicians have expressed anxiety about how to move forward with aligning their practices to fit new payment models when the particulars had yet to be written. Shortly after the HHS announcement, American Academy of Family Physicians (AAFP) President Wanda Filer, MD, MBA, said Medicare payment reform is fundamental to improving health care quality and outcomes, and improving the efficiency of care delivery. "The AAFP believes that MACRA is, by congressional intent and design, a law aimed at transforming our health care delivery system into one that is based on a strong foundation of primary care," she said. She noted that the law's focus on the patient-centered medical home was a "direct expression of the congressional desire to see our health care delivery system more aggressively promote, reward and emphasize primary care." For more information, go to <http://www.aafp.org/news/practice-professional-issues/20160428macraru.html>.

### **AAFP Advises Lawmakers on Bills Intended to Curb Opioid Abuse**

Two House committees recently approved bills targeting prescription opioid abuse as lawmakers signaled their intent to pass legislation addressing patient safety and addiction treatment. The AAFP has weighed in on a number of those measures. The AAFP advised members of the House Energy and Commerce Committee of its support for four bills the committee was considering, but expressed serious concerns about a fifth bill. AAFP Board Chair Robert Wergin, MD, said the Academy backs action to cover expanding access for patient care and protection for qualified individuals who prescribe opioids. One bill, the Opioid Use Disorder Treatment Expansion and Modernization Act, would increase the maximum number of patients for whom an individual physician can provide medication-assisted treatment for opioid addiction from 100 to 250. Another bill, the

Reducing Unused Medications Act, clarifies under what circumstances a patient could initially choose to have a prescription partially filled, returning for more only if needed. This measure is designed to limit the amount of unused pills in a person's possession and reduce the chance that medication could be obtained inappropriately by someone else. The AAFP supports both of these bills. Noting its support for wider use of naloxone in treating opioid addiction, the AAFP also pledged support for a bill known as Lali's Law that would authorize federal grants to states to promote and monitor naloxone prescriptions. A fourth bill, the John Thomas Decker Act, calls on the Centers for Disease Control and Prevention to study what resources are available to young athletes to educate them about the hazards of opioid use and abuse, nonopioid treatment options that are available to them, and how to seek addiction treatment. The AAFP notified the committee that it does not support a bill calling for creation of a federal task force to review and modify best practices regarding pain medication prescriptions. For more information, go to <http://www.aafp.org/news/government-medicine/20160504opioidbills.html>.

### **AAFP Backs Proposal for Substance Abuse Program Record Sharing**

The Substance Abuse and Mental Health Services Administration (SAMHSA) has proposed a new rule to give substance abuse treatment programs more leeway to share records with family physicians who care for the programs' patients outside the treatment facility setting. In a recent letter to the acting administrator of SAMHSA, AAFP Board Chair Robert Wergin, MD, said the AAFP urges its members to be involved in the diagnosis, treatment, and prevention of substance abuse and addictive disorders, as well as the secondary diseases related to these disorders. However, under current SAMHSA regulations, family physicians do not always get all the records they need from treatment centers. The proposed rule would revise consent requirements to permit a more general description of the individuals to whom a disclosure is made, but only if they have a "treating provider relationship" with the patient whose information is being disclosed. For more information, go to <http://www.aafp.org/news/government-medicine/20160427samhsasharing.html>.

— AFP AND AAFP NEWS STAFF

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