

National Credentialing Forum AMA Update

February 5, 2021

Topics

- COVID Updates and Resources
- Telehealth
- Physician Wellbeing
- New Initiatives
- Organized Medical Staff Section (OMSS) Activities and Policy
- Profile Updates



The AMA's Strategic Work

Chronic Disease:

Leading the charge to confront public health crises and eliminate health inequities

Credible nationwide impact on chronic health issues including opioids, hypertension and diabetes

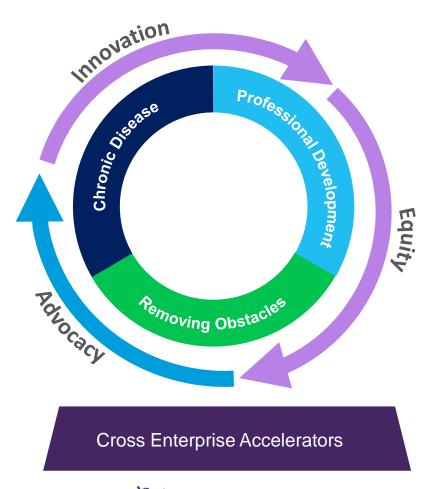
Professional Development: Driving the Future of Medicine

 Reimagining training, education, and lifelong learning and promoting innovation to tackle the biggest challenges in health care

Removing Obstacles:

Removing Obstacles that interfere with patient care

 Making the patient-physician relationship more valued than paperwork, technology an asset not a burden, and physician burnout a thing of the past



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COVID Updates and Resources

PUBLIC HEALTH

COVID-19 volunteer guide for health care professionals

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CONTENTS

State volunteer registration sites | The MAVEN Project | Volunteers in Medicine | Modified licensing requirements | U.S. physician and student workforce statistics | Guides & resources | Ethical Issues during a pandemic | Liability protections | Essential Tools & Resources

Updated Feb. 2, 2021

This American Medical Association (AMA) guide includes information for physicians and health care professionals who want to support communities severely impacted by COVID-19. It tells how and where to volunteer—and things to consider before registering.

For state agencies and institutions, the guide includes information on third-party organizations that can identify and match volunteers accordingly as well as resources for credentialing in an emergency.

Featured updates: COVID-19

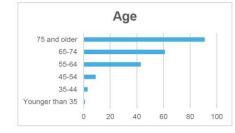
Track the evolving situation with the AMA's library of the most up-to-date resources from JAMA, CDC and WHO. **Read the Latest**



AMA

COVID-19 PHYSICIAN MORTALITY REPORT

In 2020, the AMA confirmed the loss of 208 physicians in the United States as a result of the pandemic.



Gender					
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Focus on Telehealth

- Continue to support additional access to digital technologies
- Advocate for continued coverage expansion and payment parity
- Expand implementation resources and support
- Understand physician and practice utilization



COVID-19 Ushered in Telehealth



Telehealth Impact Survey COVID-19 Healthcare Coalition Telehealth Workgroup

American Medical Association, American Telemedicine Association, Change Healthcare, Digital Medicine Society, Massachusetts Health Quality Partners, MassChallenge HealthTech, Mayo Clinic, and MITRE.



Systems and practices across the country selected a vendor, trained thousands of providers, and created new tasks/workflows in a **matter of days**.

60% reported that telehealth has improved the health of their patients.

68% are motivated to increase the use of telehealth in their practice.

55% reported it improved satisfaction in their work



73.3% indicated that no or low reimbursement will be a major challenge post-COVID



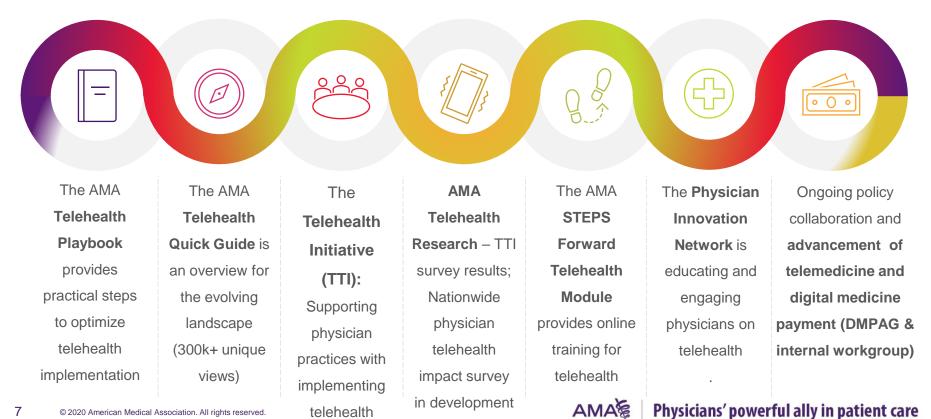
More than 64% said technology challenges for patients were a barrier to the sustainable use of telehealth.

58% are not able to currently access their telehealth technology directly from their electronic health records





Telehealth Activities and Resources



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AMA Return on Health Research

Understand how various types of physicians, practices and health systems are currently experiencing and quantifying the value of virtual care.

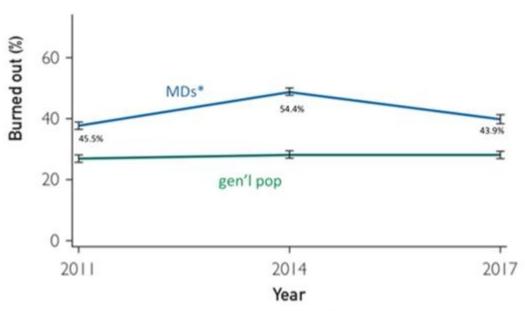
Develop a 'return on health' conceptual framework for measuring the value of virtual care that describes each of the potential value streams it can unlock.

Identify key metrics for measuring the value that virtual care can deliver across defined each value stream (e.g. clinical quality and outcomes, operational improvements, financial improvements, access to care, patient/physician experiences, health equity).

Develop 10 illustrative use cases that portray how different virtual care modalities deliver value in a range set of healthcare environments (e.g. fee-for-service vs. value-based payment; small health system vs. large medical group, etc.).

Develop and issue a report that uses the illustrative case studies to bring depth and practical examples to the conceptual framework and provides industry with an actionable framework for defining and measuring the value of virtual care.

Nearly 1/2 of MDs burned out





Med students start stronger than the general public

*40% > than gen't pop: controlled for hrs worked, educational level, age, gender, relationship status

Research: National Survey

- Cognitive load
- Self evaluation
- Depression/suicide
- EHR/Usability
- Gender
- Race and ethnicity
- Resilience



Wellbeing Resources and Tools

Act: Steps Forward

0.5 Credit CME

Caring for the Health Care Workforce During Crisis Creating a Resilient Organization



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Establishing a Chief Wellness Officer Position Create the Organizational Groundwork for Professional Well-Being



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Chief Wellness Officer Road Map Implement a Leadership Strategy for Professional Well-Being

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Peer Support Programs for Physicians Mitigate the Effects of Emotional Stressors Through Peer Support

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What to Look for in Your First or Next Practice Evaluate the Practice Environment to Match Your Priorities



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Interoperability – Secure Exchange

January 25, 2021

Elkridge, Md. — Onyx Technology LLC and AMA Innovations Inc., a technology development subsidiary of the American Medical Association, today announced a collaboration to build connections between health care providers and social services organizations. The intent is to support holistic health and social care by improving links between health care providers and social care networks. The companies will combine their technical expertise to deliver a powerful, HL7[°] FHIR[®]-based interoperability solution in response to the Department of Health and Human Services (HHS) Administration for Community Living's (ACL) Innovative Technology Solutions for Social Care Referrals Challenge.

"FIRE Wire is a lightweight, standards-based messaging and directory solution designed to facilitate secure, private, point-to-point patient information and referral exchange between individuals across organizations. With FIRE Wire, physicians and others will be able to easily establish trust and exchange messages and structured health information." Tom Giannulli, MD, MS



Availability of Personal Protective Equipment (Policy H440.810, I-20)

Whereas, Physicians have an ethical duty to serve during pandemics.....

1. Our AMA affirms that the medical staff of each health care institution should be integrally involved in disaster planning, strategy and tactical management of ongoing crises.

2. Our AMA supports evidence-based standards and national guidelines for PPE use, reuse, and appropriate cleaning/decontamination during surge conditions.

3. Our AMA will AMA advocate that it is the responsibility of health care facilities to provide sufficient personal protective equipment (PPE) for all employees and staff in the event of a pandemic, natural disaster, or other surge in patient volume or PPE need.

4. Our AMA supports physicians and health care professionals in being permitted to use their professional judgement and augment institution-provided PPE with additional, appropriately decontaminated, personally-provided personal protective equipment (PPE) without penalty.

5. Our AMA supports a physician's right to participate in public commentary addressing the adequacy of clinical resources and/or health and environmental safety conditions necessary to provide appropriate and safe care of patients and physicians during a pandemic or natural disaster.

6. Our AMA will work with the HHS Office of the Assistant Secretary for Preparedness and Response to gain an understanding of the PPE supply chain and ensure the adequacy of the Strategic National Stockpile for public health emergencies.



Other OMSS Policy Activity

Assessing Competency in Late Career Physicians	Assistant Physicians
 Policy D-275.956, "Assuring safe and effective care for patients by late career physicians" – identify and convene Work group noted that very few hospitals have age specific guidelines and that there is evidence that the number of disciplinary actions increases at 65 and 70 Status: Awaiting a report from the Council on Medical Education which is expected to include a set of guiding principles as a basis for developing guidelines for the screening and assessment of late career physicians. 	 Assistant Physicians have completed medical school but have not matched with a residency program Initiating policy work on whether and how Assistant Physicians should be incorporated into the medical staff oversight process

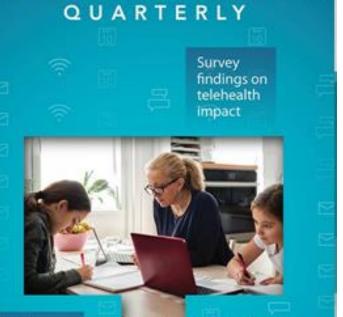
Physicians' powerful ally in patient care

AMA

Profile Enhancements/Changes

- Drug Enforcement Administration
 - Business activity subcodes
 - Payment status
 - Activity status
- Adding full name associated with each license





CREDENTIALING

AMA's Credentialing Services team made improvements just for you Working from home and meeting the needs of your facility

CLICK TO READ

Questions?

Emerging issues in medical staff governance: What you need to know Elizabeth A. "Libby" Snelson, Esq. Presenter Feb. 10 at 7 pm (central) Learn the latest on: Telemedicine and disaster privileges Remote hearings Board certification requirements Secret voting or balloting

Free to register



