The physicians of this great state are committed to improving the health of all Texans. To get there, we must enhance the environment in which Texas physicians practice medicine. The current road may be filled with bumps and even dangerous curves, but the Texas Medical Association is dedicated to smoothing those bumps and straightening out those curves so that we can see where we will travel. Our government must make it easier — not more difficult — for us to care for our patients.

TMA's Healthy Vision 2020, Second Edition, articulates specifically and directly what we are asking of the Texas Legislature and state regulators. The recommendations range from the simple (Protect Texas’ landmark medical liability reforms) to the complex (Devise and enact a system for providing health care to low-income Texans with realistic payment to physicians, less stifling state bureaucracy, and no fraud-and-abuse witch hunts) to the most fundamental (Pass no laws or regulations that interfere with the patient-physician relationship).

A strong, effective, and efficient health care system is critical for the physical health of Texans and the economic health of our state. We look forward to working with our elected officials, opinion leaders, and health care policy experts to make our healthy vision a reality for Texans.

Austin I. King, MD
President, Texas Medical Association

TMA’s Top 10 Recommendations

1. Increase funding for graduate medical education.
2. Improve physicians’ Medicaid and CHIP payments to more appropriately reflect the services they provide to patients.
3. Hold health insurance companies accountable for creating and promoting adequate physician networks.
4. Devise and enact a system for providing health care to low-income Texans that improves efficiencies by reducing bureaucracy and paperwork.
5. Stop any efforts to expand scope of practice beyond that safely permitted by nonphysician practitioners’ education, training, and skills.
6. Promote government efficiency and accountability by reducing Medicaid red tape.
7. Protect physicians’ ability to charge for their services.
8. Improve the state’s public health defense to better respond in a crisis.
10. Protect the patient-physician relationship from corporate intrusions.
Ensure an adequate health care workforce

Texas — even more than most of the rest of the country — needs more physicians and other health care professionals. We need to build physician-led health care teams that can safely meet the diverse needs of the state’s population. Texas needs to invest more in our medical school and graduate medical education (GME) training programs to cultivate future generations of Texas physicians, ensuring stable access to health care for all Texans.

TMA Recommendations

- Increase funding for graduate medical education.
- Support and develop new GME programs in the specialties that best reflect Texas’ health care needs.
- Sponsor research to identify and promote innovations in training residents for practice in Texas.

Protect the trusted patient-physician relationship

The patient-physician relationship is unique in modern American life. Patients place their lives in their physicians’ hands. Not only must they trust in their doctors’ knowledge, experience, and skill, but they must also trust that their physician is acting in their best interest — neither motivated nor distracted by competing interests. In return, the physician is responsible for recommending and applying the most appropriate, science-based treatments for patients’ individual circumstances and medical conditions.

TMA Recommendations

- Enact strong state laws that protect independent medical judgment for physicians in all employment relationships.
- Strengthen state laws so that corporate entities cannot direct medical decisions to the detriment of patient care.
- Pass no laws or regulations that interfere with the patient-physician relationship.
- Strengthen laws that protect physicians’ due process rights and prohibit retaliation for patient advocacy in all employment relationships.
- Oppose government mandates that require physicians to provide care they conclude is medically inappropriate or violates their personal conscience or professional ethics.

Promote high-quality, effective, and efficient models of care

Our current health care delivery system does too little to coordinate care for patients with expensive-to-manage chronic conditions. Government and other payers are requiring physicians to invest in high-dollar health information technology systems without ensuring that the investment translates into better patient care. We are responding to calls to measure a physician’s effectiveness and efficiency, but government metrics imposed on physicians often are off-target. The way to save money in health care is not through ill-advised, random rationing of care, but rather through systems that ensure the right professionals provide the right care, at the right place, at the right time.

TMA Recommendations

- Support the patient-centered medical home model and financial incentives from both state and private payers.
- Support legislation allowing state leaders to work with the Centers for Medicare & Medicaid Services to develop a comprehensive coverage solution for the unique health care needs of low-income Texas.
- Support increased funding for state and local mental health initiatives so those with mental illnesses are provided opportunities for treatment in the most appropriate settings.
- Stop any efforts to expand scope of practice beyond that safely permitted by nonphysician practitioners’ education, training, and skills.
- Increase funding for women’s preventive health services and continue collaborative, evidence-based efforts to ensure all women in need can obtain services and preventive care, particularly before, during, and between pregnancies.
- Ensure telemedicine services are provided in accordance with Texas Medical Board rules and accepted standards of care.
- Enact legislation that would eliminate insurance company discrimination against local physicians getting paid for after-hours telephone and telemedical consultations.
- Support an interstate compact for telemedicine licensing that guarantees state sovereignty over the practice of medicine in Texas.
**Promote government efficiency and accountability by reducing Medicaid red tape**

Physicians want to take care of Medicaid patients, and they do so throughout the state. Unfortunately, red tape and bureaucratic hassles coupled with low pay are forcing many physicians to limit the number of new Medicaid patients they take — or to not take any at all. For more than a decade, physician participation rates have been in a free fall, plummeting 33 points in 14 years. In 2000, 67 percent of Texas physicians reported accepting all new Medicaid patients; today, only 34 percent do.

**TMA Recommendations**
- Establish a centralized and seamless credentialing portal so physicians can apply to participate in traditional Medicaid and all local Medicaid HMOs simultaneously.
- Improve coordination of benefits between Medicaid and Medicaid HMOs to prevent recoupment of money from physicians after services were provided in good faith.
- Strengthen HMO network adequacy requirements. Apply stiffer penalties for plans that fail to maintain adequate networks.
- Ensure physicians and providers have a fair process and meaningful opportunity to appeal allegations of Medicaid fraud and/or abuse.

**Provide appropriate state funding for physician services**

Physicians are critical to a cost-effective Texas health care system. Without them, the state’s efforts to increase preventive care, improve medically necessary treatment for the chronically ill, and reduce inappropriate emergency department utilization will falter. The prospect of cutting physicians’ payments is not an effective tool for controlling health care costs, and often exacerbates the cost of care.

**TMA Recommendations**
- Devise and enact a system for providing health care to low-income Texans with realistic payment to physicians, less stifling state bureaucracy, and no fraud-and-abuse witch hunts.
- Increase Medicaid primary care physician payments on par with Medicare and extend higher payments to subspecialists and the Children’s Health Insurance Program.
- Restore Medicare Part B coinsurance payments for dual-eligible patients.
- Protect tax law provisions that acknowledge physicians’ unique roles in caring for all patients — this includes physicians who provide charity care and participate in low-payment government programs.
- Prohibit tax auditors from accessing patients’ private medical records.

**Establish fair and transparent insurance markets for patients, employers, and physicians**

Physicians want better access to coverage for their patients. However, they are frustrated by the confusion and administrative burdens imposed by the federal government’s implementation of insurance exchanges. While the Affordable Care Act (ACA) exchanges have brought about new insurance coverage opportunities for Texans, significant problems remain — and potential new ones are developing — with traditional health insurance companies and Texas’ workers’ compensation program.

**TMA Recommendations**
- Require health plans to clearly differentiate on their enrollee ID cards when the patient bought coverage through the ACA exchange and whether the coverage is a subsidized exchange plan.
- Require any insurance product (sold inside or outside the health insurance exchange) that uses a “narrow” or “limited” network to publicly disclose this network structure up front as well as any corresponding limitations to consumers and physicians.
- Prohibit health plans from imposing “acceptance as payment in full” notations on any electronic funds transfer or checks that are deposited without knowledge of the notation.
- Recognize the private nature of contracting by keeping physicians’ negotiated contract rates with health plans proprietary.
- Protect physicians against efforts to have their rates set by the federal or state government.
- Reduce barriers to physician participation in the Texas workers’ compensation system.
- Ensure that peer reviews of physicians in the workers’ compensation system are performed by physicians, not by providers without equivalent or appropriate training and education.

**Use health information technology wisely**

Health information exchanges (HIEs) are supposed to help physicians and providers share patient information quickly and securely. The ability to have the right information at the right time to enhance care quality is one of the greatest promises of digitized medicine. Unfortunately, it is very difficult and costly to map patient data across disparate proprietary electronic health record systems. Because of the cost, HIEs are prioritizing connections with large health
care institutions that have significant amounts of patient data. A growing number of institutions are working against the development of interoperable systems, and instead are creating ones that make physicians reliant on them. This approach leaves many physicians out of the communication loop, unable to share patient information securely through an HIE. Many physicians still have to share patient information via secure fax machines.

TMA Recommendations

- Establish patient safety, privacy, and quality of care as the guiding principles for all HIE efforts. Cost reduction and health care efficiency are the expected byproducts.
- Encourage HIE participation through legislation that will hold physicians responsible only for their own actions or inactions in regard to a possible breach of protected health information provided to an HIE (and not for the negligence or bad behavior of others).
- Allow for the release of medical record copies in any reasonable format the health professional chooses.

Promote good health; save taxpayer dollars

A healthy and wealthy Texas depends on a sound health care system with robust medical care and effective public health components. There is a legitimate role for limited government to play in safeguarding a sound, responsive public health infrastructure in Texas. We must invest in scientifically proven wellness and public health programs that complement physician efforts to keep women and babies healthy, and reduce obesity, tobacco use, chronic disease, and cancer.

TMA Recommendations

- Prohibit the sale of electronic cigarettes and associated products to minors.
- Make Texas smoke free and encourage cities throughout the state to adopt minimum policies for smoke-free public places, workplaces, restaurants, and bars.
- Support funding for interventions proven to reduce tobacco use, such as the Texas Quitline.
- Improve vaccination funding for Texas’ adult safety net programs.
- Clarify ImmTrac requirements to ensure minors’ immunization records are maintained unless they choose to have them purged as adults.
- Help communities build environments that promote exercise and increase families’ access to nutritious food.
- Support school-based anti-obesity efforts by increasing physical activity and health education requirements for students.

Protect and promote a fair civil justice system

Texas has taken no more important step to strengthen our health care delivery system than passing the 2003 medical liability reforms. That law swiftly ended an epidemic of lawsuit abuse, brought thousands of sorely needed new physicians to Texas, and encouraged the state’s shell-shocked physicians to return to caring for patients with high-risk diseases and injuries. We must protect our landmark reforms.

TMA Recommendations

- Protect Texas’ landmark medical liability reforms, including caps on noneconomic damages and protections for emergency services.
- Oppose efforts that would create new causes of actions against physicians and other health care providers who deliver science-based and clinically appropriate care.
- Maintain the integrity of the Texas Advance Directives Act, free from exposure to medical liability suits.
- Require that physicians’ licensure fees be used to fund the operations of the Texas Medical Board to ensure the highest quality of care for patients.

“We must enhance the environment in which Texas physicians practice medicine. Our government must make it easier — not more difficult — for us to care for our patients.”

Austin I. King, MD