

AAFP Statement: AAFP Makes Strong Request for RUC Changes, Creates Task Force to Identify Better Payment for Primary Care Services

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Statement Attributable to:
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Board Chair
American Academy of Family Physicians

“Today, the American Academy of Family Physicians took bold action toward more accurate and equitable payment for our members and their patients. We called on the AMA/Specialty Society Relative Value Scale Update Committee — commonly referred to as ‘the RUC’ — to make specific changes in its structure, process and procedures. We are calling for:

- more seats for family medicine, general internal medicine and general pediatric medicine;
- the addition of three new seats for external representatives such as consumers, employers and health plans;
- a permanent seat for geriatric medicine;
- the elimination of existing rotating subspecialty seats as the current representatives ‘term out;’ and
- greater voting transparency on all RUC votes.

“If implemented, these changes will help rebalance payment to primary care physicians and more accurately reward the complex and comprehensive care they provide to patients. We requested a decision from the RUC by March 1, 2012, regarding the implementation of these changes.

“Separate from and independent of the decision to work for changes from within the current RUC structure, the AAFP Board of Directors also approved the formation of a task force to explore the development of alternative methods for appropriately valuing the services provided by primary care physicians in the current fee-for-service model. This task force, which will present its findings to the AAFP Board within the next six to nine months, will be composed of representatives with health policy and research expertise, representatives from the consumer and employer communities, and representatives from the AAFP Board, from AAFP commissions, and from the AAFP RUC and Current Procedural Terminology teams. Representatives from the three other primary care organizations will also be invited to participate in the task force.

"While each of these actions is independent of the other, both will go a long way in better balancing the payment system that has too long been biased toward acute care and procedures and not primary care and prevention."

Editor's Note: To arrange an interview with Dr. Heim, contact Leslie Champlin, 800-274-2237, Ext. 5224, or lchamplin@aafp.org.

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About the American Academy of Family Physicians

Founded in 1947, the AAFP represents 100,300 physicians and medical students nationwide. It is the only medical society devoted solely to primary care.

Approximately one in four of all office visits are made to family physicians. That is 228 million office visits each year — nearly 84 million more than the next largest medical specialty. Today, family physicians provide more care for America's underserved and rural populations than any other medical specialty. Family medicine's cornerstone is an ongoing, personal patient-physician relationship focused on integrated care.

To learn more about the specialty of family medicine, the AAFP's positions on issues and clinical care, and for downloadable multi-media highlighting family medicine, visit <http://www.aafp.org/media>. For information about health care, health conditions and wellness, please visit the AAFP's award-winning consumer website, <http://www.familydoctor.org>.