Innovation in Medicine:
How Physicians Have Adapted Their Practices During COVID-19

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American Medical Association
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Presiding during a pandemic

- Adapting to virtual platforms
- Continuous updates to media
- Providing internal and external communications
- Building alliances across industries
- Providing reliable and credible information
- Focusing on vaccine development, clinical trials, education, and administration
- Recognizing and responding to health inequities
The evolution of medical meetings

• Phase 1: Cancel altogether
• Phase 2: Virtual platform with truncated program, limited opportunity for interaction
• Phase 3: Virtual platform with full programming, more interaction
• Phase 4: Hybrid model
• Phase 5: ???

Practice innovation during COVID-19

• Enhanced safety procedures
• Rise of telehealth
• Remote patient monitoring
• Advocating for vaccine science and safe treatments
Practice innovation: Safety procedures

• Screening for active or suspected COVID
• Temperature checks at the door
• Social distancing
  • Rearrange waiting room
  • Special spirometry isolation
  • Reconfiguration of front desk
• Mask wearing
• Need for PPE for staff

Practice Innovation: Removing burdensome regulations for remote care

• Rapid full-scale implementation of telemedicine
• AMA, ACAAI, others all working to remove burdensome regulations to:
  • Prevent health care workers from offering remote care
  • Provide payment parity for virtual and in-person visits
• Proliferation of telemedicine platforms
• Concerns regarding privacy, data integrity
• Broadband availability as a social determinant of health
• Patient acceptance good
• CMS removed restrictions – allowing more flexibility for Medicare patients – but only until end of PHE
AMA’s history supporting telehealth

- **The Telehealth Initiative** – This AMA-led collaborative supports physician practices with implementing telehealth services.
  
  - Over 20 practices are receiving coaching support and identifying best-practices and future resource needs.

- **STEPS Forward Module** – An updated module on telemedicine has been made available in the EdHub.

- AMA has also worked to **develop patient-facing resources** on telemedicine.

Physician resources to advance telehealth

- The **AMA Digital Health Implementation Playbook**:
  
  - A series of comprehensive step-by-step guides to implementing digital health solutions;
  
  - Insights from across the medical community;
  
  - Offers key steps, best practices and resources to support an efficient and clear path to implementation and scale;

  - Visit [ama-assn.org](http://ama-assn.org) for more information
Practice innovation: remote monitoring

Limits of remote care for allergy patients

- Unable to perform allergy skin testing remotely
- Unable to perform challenge procedures remotely
- Difficulty treating allergy patients remotely – immunotherapy, biologics
- Limited availability of home spirometry
COVID measures create benefits for allergy patients

- Work/school from home reduces transmission of all viral illnesses
- Masks provide protection from certain allergens
- More control of diet reducing accidental allergen exposures
- Normalization of wearing masks when outdoors

Corsi-Rosenthal Box Air Cleaner

- Inexpensive and effective, low-tech solution for allergies
- Do-it-yourself air cleaner, often used in classrooms
- Uses box fan ad MERV-13 furnace filters
- Comparable to commercial cleaners
- Developed by Jim Rosenthal, CEO of Tex-Air Filters
- Idea originated from Dr. Richard Corsi, Dean of Engineering a UC-Davis
Practice innovation: Novel therapies and vaccines

- Antivirals
- Antiinflammatories
- Vaccines

Vaccine development process

- mRNA technology is not new science.
- Highly coordinated development and production processes.
- Cutting edge science and research
- Large-scale clinical trials and review processes.
The physician’s role in vaccine adoption

• Health care professionals and patients must have confidence in COVID-19 vaccines.

• We need continuous updates about the review process and safety and efficacy data.

• We must work to build trust, especially in communities with historically well-founded mistrust in medicine.
AMA response to COVID-19

- Provide up-to-date, evidence-based resources, research and clear guidance from trustworthy sources.
- Help physicians and practices recover from the disruption and damage of the pandemic.
- Work at the highest levels to reduce obstacles to patient care.
- Advocate for science-based, equitable policies.

Visit AMA-assn.org

Physician resources for battling COVID-19

We know you rely on timely, accurate and evidence-based information in the face of fear and misinformation.

- Telehealth Implementation Playbook
- AMA Physician’s Guide to COVID-19
- CPT Coding Guidance
- JAMA Network Coronavirus Updates
- Managing Mental Health
- Answers to your frequently asked questions
Recent advocacy wins for physicians

- Averted deep Medicare payment cuts in 2021.
- Obtained changes to federal law to make telehealth reimbursements equivalent to in-person visits.
- Helped secure billions for physician practices through Provider Relief Fund.
- Secured use of DPA to ramp up production of PPE, vaccines and rapid COVID tests.
- Convinced CMS to provide physicians with the option to opt out from the 2020 MIPS program.
- Helped enact important protections from medical liability during the pandemic.

Lessons learned: Preparing for the next pandemic

- Better coordination across federal and state governments
- A better diagnostic testing infrastructure
- A process for accelerated vaccine and therapeutic development
- Enhanced state and federal stockpiles of supplies
- A comprehensive data-collection strategy
Physicians’ powerful ally in patient care
The Three Ps: Revisited

Kathleen R. May MD, FACAAI
2021 Bela Schick Lecture
ACAAI Annual Meeting, New Orleans
November 6, 2021

Disclosures

- No financial COI related to this presentation
- The views presented are mine alone, other than as related to specific ACAAI projects and programs
Objectives

1. Acknowledge racism and its impact
2. Consider the downstream effects of population-level barriers in education
3. Discuss ongoing diversity and health equity challenges, and how we might approach current needs

The Three Ps: Unabridged
“First, the patient...”
High school graduate outcomes

Fig.2  Page, H, High School Graduate Outcomes Achievement, *The Governor’s Office of Student Achievement*, Georgia, 2016.

Fig.19  Page, H, High School Graduate Outcomes Achievement, *The Governor’s Office of Student Achievement*, Georgia, 2016.
Fig. 27.3 from 2018 Status and Trends in the Education of Racial and Ethnic Groups, *National Center for Education Statistics*
Physicians

Physician demographic trends

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Physicians*</th>
<th>Population**</th>
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<td>African-American</td>
<td>5.0%</td>
<td>12.4%</td>
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<tr>
<td>American Indian</td>
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<tr>
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<td>Caucasian/white</td>
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<td>Latinx</td>
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<tr>
<td>Pacific Islander</td>
<td>0.1%</td>
<td>0.2%</td>
</tr>
<tr>
<td>Other/unknown</td>
<td>15.5%</td>
<td>0.2%</td>
</tr>
</tbody>
</table>

*AAMC Fig 18, Percentage of all active physicians by race/ethnicity 2018
**US Census Bureau Quick Facts 2021
If you think you are too small to make a difference,
you haven’t spent a night with a mosquito

-African proverb