

CFAS Connects: Academic Medicine in Political Transition

December 17, 2020

Moderator:

- Arthur Derse, MD, JD, Chair of the CFAS Advocacy Committee and member of the CFAS Ad Board

Panelists:

- Karen Fisher, JD, AAMC Chief Public Policy Officer
- Tannaz Rasouli, AAMC Senior Director of Public Policy and Strategic Outreach

CFAS Advocacy Committee Objectives:

- Communicate concerns of faculty and academic societies represented in CFAS to AAMC advocacy leaders
- Promote coordination of efforts by member academic societies with the AAMC on policy and advocacy issues
- Provide regular opportunities for bi-directional communication about policy issues between AAMC government affairs staff and committee members (representing societies and faculty)
- Educate faculty about current issues and AAMC advocacy efforts for academic medicine, including advocacy presentations for Learn Serve Lead, CFAS spring meetings, and **CFAS Connects**.

Karen Fisher's Presentation:

- The AAMC is looking forward to forming relationships with the people the Biden administration appoints to lead health agencies such as the FDA, HHS, CDC, etc.
- President-elect Joe Biden's election didn't result in many Democratic gains in the House and Senate, as would normally be expected for the party of the winner of a presidential election.
- There's a mix of moderate and progressive Democrats in House and Senate so even deciding what will happen in House will be interesting.
- The AAMC has been very active addressing COVID pandemic and has already met with President-elect Biden's COVID task force.
- Our best advocacy is experience and expertise of our constituents.

Tannaz Rasouli's Presentation:

- Congressional dynamics are going to have impact of what Congress will be able to move forward: will tight margins force lawmakers to come together or will they result in gridlock?

- What complicates things further is that COVID will be all-consuming for a while, so it will be a top priority for administration. The residual effects of pandemic will consume a lot of energy too, i.e. delayed care, delayed screenings, back log of health status in country, mental health and economic fallout, etc.
- Common themes on agenda beside COVID:
 - One of first actions of new admin will be looking at executive orders they want to reverse or rescind
 - Health care coverage by strengthening ACA or looking at other options
 - This president has history with medical research, was force behind cancer moonshot and he continued that after his vice presidency. He wants to make medical research more accessible to patients and drive cures for cancer.
 - Other priorities: structural racism and their impact on health equity, rebuilding our public health infrastructure.
- There will be an expectation that Congress and new admin focuses on infrastructure as part of some economic recovery package.
- Then there's the ever-present question of federal deficit: \$4 trillion this year on COVID aid alone, we may be entering era where Congressional sentiment shifts toward austerity.
- The AAMC has released a set of materials on our advocacy priorities.
- Faculty members interested in engaging in advocacy can get involved through AAMC Action.
- CFAS reps are encouraged to educate policymakers, especially new policymakers and new staff members, about value of academic medicine. If there are impactful projects or initiatives at local level that address some of these thorny national issues, please let us know so we can bring them to the attention of lawmakers.

Q&A:

- There was discussion about whether the current administration's structuring of and political interference in some federal health and research agencies will cause problems for the incoming administration. The NIH hasn't had as many internal challenges as the CDC, but the Biden administration may consider some restructuring of the CDC.
- There's a long list of executive orders and regulations the Biden team would like to overturn and rescind.
 - The AAMC has opposed many of President Trump's executive orders in the education, health care, and immigration spaces.
- President-elect Biden wants to work more collaboratively with Congress and would prefer not to settle conflicts via executive orders but may have to resort to that approach if Congressional gridlock sets in due to the thin majorities.

Workforce expansion:

- GME and workforce expansion are issues that the AAMC works on continuously.

- COVID is dramatically demonstrating the need to expand health workforce capacity.
- CFAS reps should educate their state reps on the need for GME expansion.
- President-elect Biden acknowledged the need to expand the health care workforce in his campaign materials.

Improving trust in vaccines among minority communities:

- There was discussion on whether there's opportunities for the AAMC's diversity groups to work together with NIH to make an impact in terms of earning minority communities' trust in the vaccine development program.
- The AAMC has been having ongoing discussions with the FDA and a special meeting with FDA Commissioner Hahn because there has been recognition on the part of academic medical center leadership that community members are looking to them to guarantee that vaccines are based on good science and not politics.
- AAMC leadership, including Chief Scientific Officer Ross McKinney, MD, are confident that the vaccine is based on good science.
- Minority communities' reservations with the vaccines stems from long-standing history and the AAMC has dedicated staff who are continually working to improve trust and health equity.

Public health infrastructure:

- There's a real need to prioritize investments in public health infrastructure, especially now.
- A strong economy depends on strong public health infrastructure.
- The missed opportunities in this pandemic illustrate the consequences of weak public health infrastructure.
- We need more people who aren't in public health to advocate for the value of public health to policymakers.
- The government may come under pressure soon to help out cash-strapped states because of the current strain on Medicare and Medicaid budgets.