



The foundation of MGMA's federal advocacy agenda is to ensure the sustainability of medical group practices and advance their ability to provide high-quality patient care.

PROTECTING THE FINANCIAL VIABILITY OF MEDICAL GROUP PRACTICES

MGMA champions physician payment policies that establish appropriate reimbursement rates. At a minimum, government rates should cover the cost of delivering care and be regularly updated commensurate with inflation. Policies should support medical practices' ability to provide a full range of ancillary services, such as imaging, testing, and physician-administered drugs. MGMA works to protect medical practices against predatory business tactics and supports regulatory flexibilities that allow practices to focus their time and resources on delivering high-quality and efficient care.

REDUCING PRIOR AUTHORIZATION BURDEN

To promote patients' timely access to care and reduce provider and patient burden, MGMA seeks to eliminate or significantly reduce the volume of prior authorizations and other prerequisites for coverage. There must be greater health plan transparency, uniform national standards, and increased automation in prior authorization. Utilization review policies should never interfere with the delivery of medically necessary care.

ADVANCING VALUE-BASED CARE

Value-based delivery reform should ensure group practices have the choice to move away from fee-for-service into alternative payment models (APMs). APMs must be designed to offer participants appropriate support, incentives, reimbursement, and flexibility. New voluntary APMs should be launched to expand participation opportunities for group practices of all specialties. Incentive payments for participation in APMs should be reinstated and extended beyond the 2026 payment year for at least two years.

IMPROVING QUALITY REPORTING

While recognizing the significant shortcomings of the Merit-based Incentive Payment System (MIPS) program, MGMA supports retaining it as an option as we work to improve overall quality reporting within the Medicare program. MIPS should be reformed to improve its clinical relevance, reduce the cost and administrative burden of reporting, and eliminate punitive penalties that disproportionately impact small, rural, and other practices unable to participate in advanced APMs. Quality reporting programs must be streamlined and support providers' ability to focus on efforts to improve patient care, not distract from them.

PROMOTING STANDARDIZATION AND EFFICIENCY

MGMA supports policies to standardize healthcare transactions, documentation requirements, claims review processes, and audits, to decrease the administrative burden and costs associated with inefficient and inconsistent standards.

MAINTAINING ACCESS TO CARE THROUGH TELEHEALTH

Throughout the COVID-19 pandemic, telehealth usage dramatically increased due to the flexibilities afforded by Congress and the Administration. Recent congressional and regulatory action extended many telehealth flexibilities through March 2025. MGMA supports long-term telehealth solutions that promote cost-effective, high-quality care while appropriately reimbursing practices. Telehealth policies must support continuity of care between a practice and its patients rather than disrupt it.

EXPANDING THE PHYSICIAN WORKFORCE

The country faces a significant shortage of physicians and other non-physician healthcare professionals. To ensure a robust provider workforce and enhancements to the nation's graduate medical education system, MGMA supports federal legislative efforts to strengthen and expand physician training programs, including, but not limited to, increasing the number of graduate medical education positions supported by federal funding.

IMPROVING IMPLEMENTATION OF NO SURPRISES ACT REQUIREMENTS

MGMA supports the implementation of the No Surprises Act (NSA) in a manner that does not interfere with medical groups' ability to engage in reasonable and balanced contractual negotiations with health plans. Independent dispute resolution (IDR) fees should be minimal to protect the ability of medical groups to initiate the IDR process. MGMA supports clear implementation guidance from the Administration to ensure practices have the information necessary to protect patients. The Administration should provide sufficient time for practices to understand and implement new processes and workflows to comply with the NSA's surprise billing and transparency requirements.

IMPLEMENTING EFFECTIVE & ETHICAL ARTIFICIAL INTELLIGENCE IN HEALTHCARE

MGMA supports the use of artificial intelligence (AI) technology to decrease administrative burden for medical practices and improve patient care. To ensure effective and ethical implementation of AI technology across healthcare environments, clear and comprehensive federal standards are needed to understand and evaluate the risks and benefits. AI technology should be transparent, ethical, and include sufficient privacy protections while not perpetuating harmful healthcare inequities. AI technology should always support rather than interfere with human decision-making.

SUPPORTING THE USE OF HEALTHCARE INFORMATION TECHNOLOGY

As the healthcare information technology (IT) space rapidly advances, MGMA supports the responsible use of IT systems to improve interoperability and the patient experience. Policymakers should strive to safeguard the security of IT systems without causing unnecessary burden on physician practices. As the health IT ecosystem becomes increasingly interconnected and medical groups rely on third-party vendors for critical IT platforms, there should be clear federal guidance on the responsibility of vendors and other actors to ensure their platforms meet applicable security standards without placing undue financial burden on providers.

With a membership of more than 60,000 medical practice administrators, executives, and leaders, MGMA represents more than 15,000 medical groups in which more than 350,000 physicians practice. These groups range from small private practices in rural areas to large regional and national health systems and cover the full spectrum of physician specialties and organizational forms.

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