This document reflects the Council’s priority focus on Education, Research and Clinical Practice policy. It is the 2018-2019 Health Policy Agenda for SGIM and defines the issues on which the SGIM Health Policy Committee, its staff and consultants will work during the remainder of the 115th Congress and into the 116th Congress.

Whenever possible, SGIM will work collaboratively with organizations with similar interests, whether they are physician groups or patient-focused. Special attention will be paid to communicating SGIM’s positions to its membership and to policymakers.

Note: In the policy topics listed below, “Active Advocacy” refers to those highest priority issues in which SGIM members, staff and consultants will be heavily involved. “Coalition Advocacy,” refers to those issues on which primarily SGIM’s consultants will work collaboratively with other stakeholder organizations to advance SGIM’s positions. Monitoring” refers to those issues on which SGIM’s consultants will track and advise, but will not actively promote a position. SGIM members, of course, are free to advocate on any of these or other issues as they see fit.

CLINICAL PRACTICE:

SGIM will continue its advocacy efforts on clinical practice issues by working in conjunction with Congress, federal agencies and other organizations with similar goals to support the activities listed below.

Active Advocacy

- Advocate to ensure that patients continue to have access to affordable health care services through the ACA and that any future reforms targeting access to private insurance and Medicaid must continue to improve patient access to needed, quality health care services.

- Advocate in support of legislative and regulatory efforts aimed at better capturing the work of primary care and other cognitive physicians in Medicare physician payment systems, including efforts that utilize health services research.

- Advocate for the implementation of reimbursement reforms, including those included in the Quality Payment Program, which rely on the reporting of patient quality outcomes and ensure that general internists are educated about these models and provide input as regulations impacting their implementation are developed.

Coalition Advocacy

- Support the opportunity for all patients to access linguistically, culturally and gender appropriate health care services.

- Support steps being taken to address opioid abuse and addiction, including measures to ensure opioids are prescribed only when medically appropriate and patients have access to the necessary services to address their addiction.
Monitoring

- Monitor the implementation of health information technology concerning its equitability for those practicing internal medicine, so physicians regardless of practice setting or economic means can acquire and utilize this technology effectively.

- Monitor the pilots being conducted by the Center for Medicare and Medicaid Innovation (CMMI) to ensure that the interests of primary care physicians and their patients are being advanced.

EDUCATION:

In fulfilling their commitment to promoting public health and improving healthcare, SGIM members lead the education of medical students, residents, and fellows as well as faculty at academic centers, teaching hospitals and in the community. They are leaders in developing and evaluating innovations in medical education to prepare tomorrow's clinicians to deliver the highest quality evidence-based, culturally appropriate and cost-effective clinical care.

To support this effort, SGIM will continue to focus on:

Active Advocacy

- Advocate for reform of the nation’s GME program, including the establishment of a payment structure that adequately supports primary care; is transparent; holds teaching institutions accountable for their training outcomes; and results in a highly-trained, appropriately distributed workforce that is well-equipped to meet the nation’s health care needs.

- Advocate for the preservation of primary care training within the Veterans Health Administration and ensure that efforts to privatize the veterans’ health care do not erode these important training programs.

Coalition Advocacy

- Advocate for sustained, robust funding for Primary Care Enhancement and Training, Centers of Excellence, and the Health Careers Opportunity Program at HRSA.

- Support the collection, analysis and dissemination of information relating to the health care workforce supply and demand; the development of recommendations for eliminating the barriers to entering and remaining in primary care; policies that foster innovative education and training programs; and improved mechanisms for financing education and training for careers in primary care.

Monitoring

- Monitor the HRSA workforce advisory committees, such as ACTPCMD and COGME, and alert leadership of opportunities for SGIM member representation as slots become available.
**RESEARCH:**

SGIM members are national and international leaders in a wide range of research, including the many subfields that fall within the broad category of health services research. The Society’s priority interests for this time period are:

**Active Advocacy:**

- Advocate for the highest possible funding levels and strongest policy environment for the National Institute for Minority Health and Health Disparities (NIMHD) and for the Clinical and Translational Science Awards (CTSA) program at the National Center for Advancing Translational Science (NCATS).

**Coalition Advocacy:**

- Support the highest possible overall funding levels for health services and primary care research at AHRQ, NIH, VA, and PCORI.

- Support research policies that allow SGIM members to conduct high-quality research and support SGIM’s priorities of improving health care delivery and promoting health equity.

**Monitoring**

- Monitor administrative actions taken by the executive branch and report to the subcommittee on the potential positive or negative impacts on the research enterprise.

- Monitor legislation pending in Congress and report to the subcommittee on the potential positive or negative impacts on the research enterprise.