## PENNSYLVANIA ACADEMY OF FAMILY PHYSICIANS POLICIES

#### **CHAPTER AND NATIONAL POLICY RELATIONS**

Unless otherwise stipulated in separate PAFP Policy, the PAFP accepts current AAFP policy regarding issues facing our members, our patients, and our specialty

#### **LEGISLATIVE MANDATES**

The PAFP opposes legislation or executive action that would require mandatory education of family physicians as a condition for prescribing specific drugs, diagnosing specific diseases, or treating specific patient populations, behaviors or illnesses above and beyond that mandated by physician specialty boards.

#### PRIOR AUTHORIZATION

The American Academy of Family Physicians (AAFP) believes prior authorizations should be standardized and universally electronic throughout the industry to promote conformity and reduce administrative burdens. Prior authorizations create significant barriers for family physicians to deliver timely and evidenced-based care to patients by delaying the start or continuation of necessary treatment. The very manual, time-consuming processes used in prior authorization programs burden family physicians, divert valuable resources away from direct patient care, and can inadvertently lead to negative patient outcomes.

The AAFP believes family physicians using appropriate clinical knowledge, training, and experience should be able to prescribe and/or order without being subjected to prior authorizations. In rare circumstances when prior authorizations are clinically relevant, the AAFP believes they should be evidenced-based, transparent, and efficient to ensure timely access and ideal patient outcomes. Additionally, family physicians that contract with health plans to participate in a financial risk-sharing agreement should be exempt from prior authorizations.

The AAFP believes that generic medications should not require prior authorization. The AAFP further believes step therapy protocols used in prior authorization programs delay access to treatments and hinder adherence. Therefore, the AAFP maintains that step therapy should not be mandatory for patients already on a course of treatment. Ongoing care should continue while prior authorization approvals or step therapy overrides are obtained. Patients should not be required to repeat or retry step therapy protocols failed under previous benefit plans.

### **STUDENT CHOICE FOR FAMILY MEDICINE**

The Academy affirms the AAFP policies on Student Choice of Family Medicine, Incentives for Increasing. In addition, the Academy will continue to directly support PA medical students pursuing Family Medicine in multiple ways, including but not limited to: leadership within the student assembly, mentorship, scholarships to attend National Conference, leadership

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development, opportunities to present research, and support for Family Medicine Interest Groups.

#### **TANNING**

The PAFP supports legislation that provides for regulation of indoor tanning facilities in the Commonwealth, which includes the protection of children.