

Physician Advocacy in Rhode Island: History, Culture & How to Get Involved

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[Managing editor's note: The following three-part commentary presents the role and scope of advocacy efforts which have been an integral part of the mission of the Rhode Island Medical Society (RIMS) and its members since its inception. The participation of physicians, health care professionals and students is vital in continuing this legacy.]

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PART 1

HISTORY AND CURRENT EFFORTS OF ADVOCACY: THE RHODE ISLAND MEDICAL SOCIETY'S COMMITMENT

The Rhode Island Medical Society (RIMS), established in February 1812 by the Rhode Island Legislature, is considered the premiere advocate organization speaking on behalf of patients and the medical profession in Rhode Island. For more than 200 years, the practice of medicine continues to evolve. Be it licensing physicians for the first time in the State's history in 1895, or advocating for patient access and rights in the modern day, RIMS has been at the center of shaping policy related to health and medicine.

RIMS was established by 46 well-intentioned physicians,¹ and has evolved to engaging and representing thousands of local physicians and physician assistants. The Society actively supports legislation that will help patients, allows physicians to practice in an environment that will not impede vital life-saving care, and opposes legislation and regulations which will harm appropriate patient care. Members of the medical society have diverse personal and professional backgrounds yet share a common goal that has been consistent for over two centuries. Through advocacy, members play a crucial role in the medical community as Rhode Island meets the evolving challenges of medical practice and quality patient care.

Over the past three years, we have seen how dramatically the world can change and how vital the medical community can be in helping to formulate effective government responses. Crises over the last few years include, but are not limited to, COVID-19, opioid use, access to behavioral health services, and protecting the rights to reproductive healthcare services. The COVID-19 pandemic exposed the fragility in the Rhode Island healthcare system. Hospitals were over-flowing with COVID-19 patients and additional field hospitals were quickly erected. Offices closed and

healthcare moved to virtual visits on a massive scale. Vaccine hesitancy became a major barrier to patients receiving the vaccines that could flatten the steep infection curve and help physicians and hospitals manage a more reasonable caseload.

RIMS has been there every step of the way, informing then Governor Gina Raimondo and now Governor Daniel McKee on sensible policies from the medical and clinical perspective. RIMS members also serve on various commissions and committees at the Rhode Island Department of Health, of the Executive Office of Health and Human Services, Office of the Health Insurance Commissioner, and other state agencies to inform a broad range of public health decisions. In addition, RIMS members go to the Rhode Island State House to advocate for informed healthcare legislation.

RIMS also sends representatives to the American Medical Association to represent the interests of Rhode Island patients and physicians on the national level. This commitment to advocacy has never been stronger.

INITIATIVES

RIMS has been influential for several monumental legislative initiatives in recent years. Some of the more recent initiatives that RIMS has either led or played a role in have included:

- Passing harm reduction center legislation; Rhode Island was the first state in the country to do so
- Codifying in law the Interstate Medical Licensure Compact, which allows physicians licensed in Rhode Island to meet common requirements for licensure in multiple states, allowing for a more fluid national physician workforce

- Providing advice and counsel to Governor McKee in the search for the next Director of the Rhode Island Department of Health
- Supporting access and protections to the legal rights to comprehensive reproductive healthcare services
- Advocating for increased Medicaid rates for several healthcare services
- Supporting firearm safety measures
- Being active on climate change and green energy initiatives
- Ensuring the state is providing adequate behavioral health supports

- Protecting physician and medical professionals' health and wellness

Through each of these important initiatives, involvement of those in the medical field from students and residents to physician assistants and practicing physicians, has been critical to the Society's contributions and successes.

Reference

1. Warde NE. A History of Quality: The Rhode Island Medical Society's Commitment. *Rhode Island Medical Journal*. August 2009;92(8):269-271.

PART 2

THE CULTURE OF ADVOCACY

The culture of advocacy is an important topic for anyone interested in advocating on behalf of patients and the medical profession. The Rhode Island Medical Society (RIMS) is deeply involved in this work. Advocacy by medical professionals is critical to ensure that the Rhode Island healthcare system is balanced among all stakeholders in a way that serves patient needs with as few barriers to patient access and care as possible.

Members of RIMS learn effective strategies for using the tools of advocacy to help mold a healthcare delivery system that is most effective in providing high quality care to our patients. RIMS has been active in medical professional education and patient advocacy for over 200 years. In addition to this fundamental knowledge, RIMS has ample opportunities for clinicians to go to the Rhode Island State House to meet with legislators and testify at public hearings. RIMS members who speak with legislators are well briefed on both the goals of the proposed changes, the political angles, and on effective advocacy practices. So, let's get started.

ADVOCACY AS A CORE RESPONSIBILITY OF THE MEDICAL PROFESSION

Clinicians are in a good position to influence public policy, which ultimately helps patients. As a clinician and patient advocate, one is asking for public resources to fund an important service or for a set of rules that allows the right clinician to provide a needed service for patients at the right time, for example. Advocacy plays a critical role in how policy decisions are made. There is a common saying in advocacy, "If you are not at the table, you are on the menu." There are many versions of this saying, but the bottom line is that if one does not show up, someone else will be there to influence the decision in their own best interests. Physicians bring knowledge as well as wisdom and phronesis to help inform policy makers and ensure patients voices are heard.

Healthcare has had major changes since the 2010 Affordable Care Act (ACA) was signed into law. As one can imagine, there was a lot of advocacy done before, during and after the passage of this landmark legislation. Even in 2022, Rhode Island legislators introduced bills to codify the 10 essential ACA benefits into state law. The ACA intends to meaningfully change the delivery of care from volume-based care to value-based care. Changes almost always bring new stresses and challenges. Changes imposed by others who are uninformed lead to feelings of loss of control and may lead to burnout. Participating in and directing changes that lead to improved outcomes enhances career satisfaction and can revitalize one's commitment to the profession.

It is important to keep in mind that we are always fighting for patients to be the winners. That is the only bipartisan message that can be universally agreed upon. In advocacy, one should always ask on behalf of someone else, never oneself. RIMS' advocacy work is to improve a system that ensures physicians are able care for patients the best way possible for everyone involved.

MEDICINE'S CRITICAL ROLE IN THE LEGISLATIVE PROCESS

Major legislation in healthcare can take decades. At the federal level, President Nixon supported HMOs but was unable to gain much traction. President Clinton's 1993 healthcare reform attempts failed. President Obama's ACA has mostly survived many political and legal challenges. To be effective, one should be willing to work with those who share the same or similar goals. It is important to keep the focus on the policy, not politics and to be mindful of working across the aisle – not isolating any political party. One key characteristic of politics is the art of compromise, which requires the advocate to know which components are critical and which can be rescinded when necessary to ensure passage. Identifying allies is also critical.

Definitions

Ask: During meetings, advocates are seeking an expected result with an intended outcome. Always enter a meeting with a legislator or administrator knowing what the “ask” is.

Inside the beltway: Professionals working in Washington, D.C.

Policy wonk: An expert on an issue

State House: Rhode Island State Capitol, but advocates and legislators rarely refer to the building as the capitol.

The Players

Advocate: Advocates speak in favor or against a position, policy, or law based on personal or professional conviction

Legislative aide: Policy specialist who is often subject matter expert and trusted resource in a legislator’s office.

Lobbyist: Paid by an organization to advocate for a particular position, policy, or law.

State and Federal Advocacy

With state legislators, meetings are usually one on one with the legislator. In Rhode Island, most state legislators do not have offices in their district, and many have shared office space at the State House for meetings. Unlike their federal counterparts, state legislators typically do not have much of a budget for staff.

At the federal level, the work begins with staff, but one should always formally request a meeting with the elected official. Meetings can take place in a variety of locations, DC or local offices, or a visit to a healthcare facility for a tour, ribbon-cutting ceremony or a press event. Facilitating a meeting with a federal official typically takes more time, so plan ahead.

Talking Points

Being properly prepared is very important when speaking about an issue or position. A focused message with salient but succinct supporting arguments will always be more effective than a meandering presentation with a vague “ask.”

Special Interests

It is often said that “special interests are running everything.” A special interest is a group with specialized knowledge in the policy under consideration. When a group meets with legislators, they too are considered a “special interest.” Legislators cannot know everything about everything, that is why a meeting with them is useful.

Patient-safety vs Patient-access Issues

Sometimes different clinician groups are allies, and sometimes they are on opposite sides of an issue. That is OK. This is not personal. It is the nature of the job.

A “patient-access issue” is generally a funding issue – financial support for needed services. Physicians (internists, family medicine, pediatricians, etc.) and non-physicians (nurse practitioners, etc.) may all agree that more funding is needed for patients to get primary care.

A “patient-safety issue” is generally a debate on how much education is needed to safely provide a particular clinical service. For example, physician assistants and physicians may disagree on the level of autonomy of practitioners, i.e., who gets to see patients independently and under what circumstances. Physician examples include C-section hospital privileges for family physicians vs obstetrician-gynecologists, hospital ICU privileges for primary care physicians in urban vs. rural areas, colonoscopy and EGD hospital privileges for family physicians vs gastroenterologists.

Political Action Committee (PAC)

This is an organization set up to make donations to political campaigns. This support helps legislators who share common goals to get elected. Election campaigns are expensive. This is one way to support legislators and build a relationship with them. Political contributions to campaigns are always separate and distinct from issue-based advocacy efforts, even for allies running for office or reelection.

PART 3

HOW TO MEET WITH LEGISLATORS AND DO EFFECTIVE ADVOCACY

Advocacy is an important part of the machinery that keeps a democracy accountable to its constituents. Physicians and physician assistants at the Rhode Island Medical Society (RIMS) are an important part of that process. Advocacy at RIMS is an organized effort that represents the patient’s interests in Rhode Island from the many stakeholders attempting to shape how healthcare is delivered. They meet with members of state government, including the governor, legislators, and administrators at all levels.

Typically, advocates meet with representatives of state government during the State House General Session (the State House is closed to new business July through December). It is critically important to encourage students and physician trainees to become involved because they are the next generation to continue the fight for patient’s health and wellness through shaping the legal and regulatory landscape of the Rhode Island healthcare system.

COMPREHENSIVE REPRODUCTIVE HEALTHCARE FOR WOMEN: AN ADVOCACY CASE STUDY

State and national political changes are a dynamic process. For example, when *Roe v. Wade* (the United States Supreme Court ruling which made abortion legal in the United States) was overturned, the decision was turned back to each state to make its own decision about this topic. Understanding the real potential for *Roe v. Wade* to be overturned, RIMS began raising the issue with Rhode Island legislators, lending support to state legislation to protect comprehensive reproductive rights of women. When advocating on such impactful topics, longstanding relationships and influence helps align legislators on important topics.

What happened?

RIMS has been a staunch proponent of the full spectrum of reproductive medical care, for many years. In Rhode Island, were *Roe v. Wade* to be reversed, the state would revert to a very restrictive anti-abortion statute in place nearly 50 years ago. RIMS' proactive strategy to help craft new legislation codifying reproductive privacy passed in 2019, which was prior to the United States Supreme Court's action in June 2022, ensuring that this act was timed to be enacted ahead of the expected ruling by the United States Supreme Court to overturn *Roe v. Wade*. That ruling came on June 24, 2022, when the United States Supreme Court ruled in the case of *Dobbs v. Jackson Women's Health Organization*. Since Rhode Island passed their codifying reproductive privacy measures in 2019, protections were already in place at the State level to ensure reproductive access and rights to Rhode Island patients.

Additionally, in response to advocacy by RIMS and others, on July 5, 2022, Rhode Island Governor Daniel McKee signed an executive order to prevent any Rhode Island state entity from cooperating with any investigation and proceedings initiated by another state against patients or abortion providers, prevent extradition from Rhode Island to another state for the purpose of abortion-related prosecution, and to provide protection to healthcare workers who participate in reproductive care, including abortions. And, in September 2022, Governor McKee announced that his FY'24 budget proposal will cover abortions for all Medicaid recipients and state employees and their spouses, two areas that RIMS urged legislators to incorporate in previous forms of legislation.

This is just one example of how strong advocacy can make a difference for the patients that we serve. The voice of Rhode Island physicians is only heard when we take time to meet with our elected officials. The future of quality healthcare depends not just on us being in our offices with patients, but also with engaging legislators on healthcare issues at the State House.

GENERAL GUIDELINES AND STRATEGIES FOR EFFECTIVE ADVOCACY

What follows is a framework for how to have a meeting with a legislator and be an advocate on behalf of patients. The purpose of a meeting with a legislator is to help educate them in making decisions to either support or oppose legislation that one is advocating for or against. An email introduction is an effective way to request a meeting and provide a brief introduction of oneself, what issue the prospective meeting will cover, and seeing if there is a day and time that works best with their schedule. Most Rhode Island legislators have full-time careers as well as serve as an elected official. They generally do not have dedicated staff, so one will often be scheduling a meeting with the legislator directly. As previously mentioned, state legislators do not have district offices, so if one wants to meet in the district, offer a spot that the legislator often visits. If the legislator suggests meeting at the State House, not every legislator has a private office, so be prepared to either share a conference room with others or meet in the hallway. Depending on the topic, one may want to start their first outreach to the legislature with Senate and House leadership. These legislators tend to have more influence on legislative outcomes and incorporating them into the meeting can only help the cause.

Meeting legislators

During a meeting be respectful in what is being "asked." One should always thank legislators who take the time to meet, who supported legislation in the past as well as their ongoing support for long-standing issues (for example, universal colon cancer screening, etc.).

An important thing to remember is that legislators have constraints that they must keep in mind when they are voting for a new law. Always thank them for educating advocates about the difficulties they face while trying to support the "ask." Sometimes they are supportive but cannot vote for it. For example, they may say that they would vote "yes" for the bill, but they were elected on a campaign of not raising taxes and this program could not be paid for without new taxes. This is frustrating but it is sometimes the reality of the job. Be sure to acknowledge that even though they voted against something that is now law, there is still interest to work with the legislator to make this law the best it can be to help those it is intended to help.

Connecting on the issues

One way to make an issue compelling is to provide a personal connection to the topic being discussed. Being a physician will give the position added weight but having a personal story about a patient's experience will help the legislator remember the reason behind the advocacy position. Here are some additional things to do and not do when meeting with legislators:

Some Dos and Don'ts

Do:

- Craft talking points prior to the conversation, ensuring three to four critical points are covered on the topic.
- Follow through with anything needing further information. Being a reliable resource for legislators starts with getting them timely and accurate information soon after the meeting with them.
- Check in with the legislators even when an “ask” is not needed and offer support on any medical legislative topics they may have a question about.
- Participate in efforts important to the public official by attending events and volunteering.
- Share on social media support for them taking time to meet on the topic.
- Consider helping legislators get elected – keep this separate from the official meeting request. Never mix the two. If one has the time, volunteer or donate to their campaign if one believes in them and their positions.

Don't:

- Publicly criticize a legislator, ever. Speak to the position, not the person, as that legislator may be needed at another time for another battle.
- Arrive late to the meeting. If one is running late, call, text, or email them with an updated ETA.
- Talk about campaign donations when meeting on a legislative topic. Keep politics and government business separate.

WHAT TO EXPECT WHEN MEETING WITH AN ELECTED OR APPOINTED OFFICIAL

The steps in a standard 15- to 30-minute meeting (generally enough time to talk about four or fewer “asks”):

- Personally introduce oneself and colleagues in the group.
- Share one's credibility (MD, DO, PhD, MBA, etc.) and connection to the topic.
- Let the legislator know what city the meeting participants are from and who their elected officials are.
- Show appreciation to them making time to meet with advocates on the topic.
- Transition to the meeting topic.
- Detail why an organization, such as RIMS, is for or against a piece of legislation, providing evidence-based reasons in the delivery.
- Proactively address what our neighboring states (MA & CT) are doing on this issue and how much will it cost or save the state.

- Is the topic being discussed going to protect or save lives? If so, discuss this.
- Discuss the “talking points” – why this new policy or law will help or harm patients or support a system that allows physicians to provide care in a way that is best for patients. Also, know which legislators are for or against the topic and why (these are not talking points but good information to have as legislators may ask this).
- Don't lecture but ask questions of the legislators as they may already know some of the information being shared. This could also allow the meeting to focus on areas that the legislators have questions about, eliminating the need to talk about already known points.
- Ask for their support or opposition for the topic.
- Write down questions where answers need to be researched and ensure proper follow-up after the meeting.
- If not already done so, provide the legislator with everyone's contact information.
- Send an email thanking the legislator for meeting and remind them in detail of what was discussed. Also, thank them for the things that they committed to following through on.

CONCLUSION

Healthcare advocacy is a professional responsibility and is vital to crafting and improving laws and shaping regulations that impact our profession and the patients we serve. One's involvement with RIMS's advocacy efforts gives patients the opportunity to have better health outcomes and improve the healthcare system for everyone involved. For any questions or a verbal tutorial, email Stacy Paterno, Executive Vice President at RIMS, at spaterno@rimed.org.

A quick summary of advocacy efforts is available at: <https://rimedicalsociety.org/advocacy-efforts>

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