Resolution 26-302

Direct Access to Medical and Pediatric Subspecialty Care

South Florida Caucus

Whereas, All ABMS-recognized non-primary care specialties are medical subspecialties requiring full training and board certification in Internal Medicine, Pediatrics, Family Medicine, or Med-Peds prior to subspecialty certification; and

Whereas, Board-certified and board-eligible ABMS-recognized non-primary care specialists are uniquely trained to diagnose and manage complex diseases, or all other specialties across both primary and subspecialty levels of care; and

Whereas, Referral requirements and administrative barriers in Florida delay access to any of the ABMS-recognized non-primary care specialists, contributing to fragmented care, duplication of services, unnecessary testing, and recurrent use of urgent care, emergency department, and hospital services; and

Whereas, Patients may directly access physicians in some of these specialties who manage different conditions without referral requirements, while access to board-certified all ABMS-recognized non-primary care specialties remains restricted, creating misalignment between level of training and access to care; and

Whereas, Timely access to all ABMS-recognized non-primary care specialties, including but not limited to allergy/immunology, cardiology, dermatology, gastroenterology, ophthalmology, pulmonology, or rheumatology, improves care coordination, reduces healthcare utilization, and complements the role of primary care and other specialties; and

Whereas, Direct access to certain specialties is already permitted in many healthcare systems, demonstrating a precedent for safe and efficient patient access without mandatory referral barriers; therefore, be it

RESOLVED, That the Florida Medical Association supports the recognition of all ABMS-recognized non-primary care specialties as direct-access specialties in the state of Florida, allowing patients to seek evaluation by board-certified or board-eligible specialists without mandatory referral requirements; and be it further

RESOLVED, That the FMA advocate for the elimination of insurance-mandated referral requirements and reduction of prior authorization barriers that delay or restrict access to all ABMS services; and be it further

RESOLVED, That the FMA support policies ensuring timely access to diagnostic testing and treatment by all ABMS-recognized non-primary care specialists at the initial point of care, without unnecessary administrative delays.

Fiscal Note:

Description	Amount	Budget Narrative
300 Staff hours	$60,000	Can be accomplished with current staff
Total	$60,000	$0 added to the operating budget

Fiscal notes are an estimate of the cost to implement a given Resolution. All Resolutions that are adopted by the House of Delegates will be referred to the FMA Committee on Finance and Appropriations for fiscal consideration.

Reference Committee: III – Legislation and Miscellaneous

References:

1. Florida Medical Association. Public Policy Compendium. https://www.flmedical.org/florida/Florida_Public/Advocacy/Public_Policy_Compendium.aspx
2. American Board of Allergy & Immunology (ABAI). https://www.abai.org/certification/initial-certification/
3. American Academy of Allergy, Asthma & Immunology (AAAAI). https://www.aaaDireai.org/tools-for-the-public/conditions-library/allergies/what-is-an-allergist