

# COVID-19 TOWN HALL Q&A – March 10, 2021

<b>QUESTION TOPIC INDEX</b> <ul style="list-style-type: none"> <li>• Questions for the Town Hall Guests</li> <li>• Health of the Public and Science</li> <li>• Advocacy and Government Relations</li> </ul>	
<p align="center"><b>Thank you for joining our informative discussion with Barbara Berney, PhD, MPH, producer and project creator; Warren Jones, MD, FAAFP, Board of Curators, Center for the History of Family Medicine; Leon McDougle, MD, MPH, president, National Medical Association; Ada D. Stewart, MD, FAAFP, president, AAFP; and Danielle Jones, director, AAFP Center for Diversity and Health Equity.</b></p>	
<b>QUESTIONS</b>	<b>AAFP RESPONSES</b>
<b>QUESTIONS FOR THE TOWN HALL GUESTS</b>	
<p>Do you think segregation and discrimination still persist in our health care system today? If so, what does that look like and how can AAFP members bring greater equity to access and care?</p>	<p>This question was answered live during the town hall session. Please see response at the 27-minute mark in the <a href="#">video replay</a>.</p>
<p>What weaknesses has COVID-19 revealed in our health care system?</p>	<p>This question was answered live during the town hall session. Please see response at the 31-minute mark in the <a href="#">video replay</a>.</p>
<p>The AAFP’s vision is to transform health care to achieve optimal health for everyone. Family medicine has emphasized prioritizing the health of all American’s during the pandemic and beyond. This includes expanding access to quality affordable care, strengthening the primary care workforce, establishing value-based payment reforms, and increasing support for telehealth benefits. What other priorities will move us closer to advancing health equity?</p>	<p>This question was answered live during the town hall session. Please see response at the 54-minute mark in the <a href="#">video replay</a>.</p>
<p>We know that unconscious bias and systemic racism exists in health care. What advice can you give to family physicians to gain the trust of populations who have a history of being discriminated against in health care?</p>	<p>This question was answered live during the town hall session. Please see response at the 46-minute mark in the <a href="#">video replay</a>.</p>
<p>What lessons from the film, “<a href="#">Power to Heal: Medicare and the Civil Rights Revolution</a>,” can we learn to continue pushing for universal health care in the United States to ensure it has a robust family medicine foundation?</p>	<p>This question was answered live during the town hall session. Please see response at the 50-minute mark in the <a href="#">video replay</a>.</p>

HEALTH OF THE PUBLIC AND SCIENCE	
Are there ways to correct pulse oximeter readings that have shown artificially elevated levels in patients with more melanin in their skin?	The FDA has issued the <a href="#">Pulse Oximeter Accuracy and Limitations: FDA Safety Communication</a> . It informs patients and health care clinicians that although pulse oximetry is useful for estimating blood oxygen levels, pulse oximeters have limitations and a risk of inaccuracy under certain circumstances that should be considered. Patients with conditions, such as COVID-19, who monitor their condition at home, should pay attention to all signs and symptoms of their condition and communicate any concerns to their health care provider. Recommendations for patients, caregivers, and clinicians are provided.
Race is a social construct, not a physiologic one. What evidence can we use to work toward ending separate results by race that may delay treatment for some individuals (e.g., estimated glomerular filtration rate [eGFR], spirometry, etc.)?	<p>The Institute for Healing and Justice in Medicine has released a report on this topic called <a href="#">Towards the Abolition of Biological Race in Medicine: Transforming Clinical Education, Research and Practice</a>. It includes information about opportunities for advocacy to remove race from eGFR and other algorithms.</p> <p>The Ohio Academy of Family Physicians has an upcoming live webinar addressing this topic called <a href="#">Challenging Race-Based Medicine in Practice</a>.</p> <p>Lastly, the AAFP has a <a href="#">policy opposing the use of race-based medicine</a> that can be useful in advocating for changes in policy.</p> <p>The AAFP will continue to monitor updates and changes in clinical guidance as many groups are working to address the inappropriate use of race in clinical decision making.</p>
How do you account for the risk factors associated with severe COVID-19 being greater in the Black community? Are those due to racial biases in the health care system?	The Centers for Disease Control and Prevention (CDC) has information on <a href="#">Health Equity Considerations and Racial and Ethnic Minority Groups</a> which address risk factors, what can be done, and data on COVID-19 and race/ethnicity.
How do we get COVID-19 vaccines to underserved neighborhoods?	The <a href="#">White House plan</a> is increasing the distributing of COVID-19 vaccines to community health centers and vulnerable populations. Contact your state and local officials to request help from the Federal Emergency Management Agency (FEMA) in setting up sites or finding out more about your <a href="#">local distribution plans</a> .
How do we make COVID-19 vaccines available in walk-in locations near public transportation?	Contact your state public health departments for information about vaccine distribution plans. The AAFP has compiled state distribution plans, along with federal vaccines sites <a href="#">here</a> .

	There is also a <a href="#">speak out to contact your governor with concerns about vaccine distribution</a> .
<b>ADVOCACY AND GOVERNMENT RELATIONS</b>	
If Medicaid pays primary care physicians commiserate to their skills, will more primary care physicians take Medicaid patients?	This question was answered live during the town hall session. Please see response at the 41-minute mark in the <a href="#">video replay</a> .