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INSIGHTS

Senate Aging Committee Hearing on Regulatory Challenges to Physician Practices

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On February 11, 2026, the Senate Special Committee on Aging [held](#) a hearing to examine how regulatory challenges for physicians can create undue burdens. There was bipartisan support about the need to address the issues of physician burnout, administrative burdens, and prior authorization reforms.

OPENING STATEMENTS

- [Chairman Rick Scott \(R-FL\)](#)

WITNESSES

- Alma Littles, MD, Dean and Chief Academic Officer, Florida State University College of Medicine - [Testimony](#)
- Lee Gross, MD, Founder, Epiphany Health Direct Primary Care - [Testimony](#)
- Jeffrey Smith, CPA, MBA, FACMPE, CGMA, Incoming Board Chair of Medical Group Management Association (MGMA) and Chief Executive Officer Piedmont HealthCare, PA - [Testimony](#)
- Corey Fiest, JD, MBA, Co-founder and Chief Executive Officer, Lorna Breen Heroes' Foundation - [Testimony](#)

MEMBER DISCUSSION

Sen. Ashley Moody (R-FL) expressed concerns that the exodus of providers from traditional practices to direct primary care will lead to care not being accessible to all patients. Sen. Moody asked what Dr. Gross would recommend to ensure that patients served by traditional practices continue to have access to quality and affordable care. Dr. Gross responded that, in his view, a physician who leaves practice completely would be seeing zero patients, but a physician who moves to a direct primary care model is still seeing patients.

Ranking Member Gillibrand (D-NY) requested that Mr. Fiest explain how the wellbeing guide developed by his organization reduces physician burnout. Mr. Fiest shared that clinicians who practice in systems that have implemented the guide have experienced a decrease in time spent outside of direct patient care and increased levels of wellbeing, both of which have decreased burnout symptoms. Ranking Member Gillibrand also asked what the expected impact of the Wasteful and Inappropriate Service Reduction (WISeR) Model will be on administrative burden and burnout. Mr. Smith expressed concerns that the model will increase the need for prior authorizations and lead to more patients seeing delayed or denied

care. Mr. Smith continued that these effects would lead to sicker patients and contribute to physician burnout. Ranking Member Gillibrand was also interested in how a mismatch in medical training and actual practice can drive burnout. Dr. Gross argued that current medical education does not teach practice management skills, which are crucial for physicians who want to practice outside of a large hospital system.

Sen. Raphael Warnock (D-GA) questioned what the effect of additional workforce shortages will have on health professionals. Mr. Fiest shared that reductions in staff will impact access, quality, and cost of health care as physicians need to take on greater amounts of administrative work. Sen. Warnock wondered if increasing the number of residency spots, through bills such as [S.2439](#), could be part of a solution. Mr. Smith said that yes, any increase in slots would help, but they also need to incentivize residents to practice general primary care. Sen. Warnock questioned if the costs associated with medical school are dissuading students from entering the profession. Dr. Littles shared that costs are a large factor for students as they must support themselves through schooling. Dr. Littles also stated that students will make decisions on what type of medicine to practice based on salaries for different specialties.

Sen. Angela Alsobrooks (D-MD) asked what impactful, preventive system reforms could address the root causes of burn out. Mr. Fiest noted that reducing administrative burden, improving nursing safety, and preventing acts of violence would make the workload more manageable for providers. Sen. Alsobrooks then asked how the current prior authorization system contributes to physicians' burdens and impacts the delivery of care. Mr. Smith explained that prior authorizations are delaying care, with more patients seeking care in urgent care or emergency rooms. Mr. Smith also highlighted that many administrative workers are experiencing high levels of burnout due to the workload and addressing administrative burdens would reduce turnover.

Chairman Rick Scott (R-FL) questioned how increased documentation requirements may reduce the desire to work in underserved areas. Dr. Littles shared that rural communities often do not have access to many electronic health record systems due to the high costs, and for systems that do have them, the complexity and lack of interoperability have a negative impact on the practice experience. Chairman Scott wanted to understand the general structure of Dr. Gross's day. Dr. Gross shared that he has a greater capacity for same-day patients, which reduces his need to refer patients to the emergency room or specialists. Dr. Gross also has more time to manage his practice.

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