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## The Decline in Professional Organization Growth Has Accompanied the Decline of Physician Influence on Healthcare

There is little doubt that most professional organizations are experiencing a failure to grow. For example, in the early 1950's, about 75% of US physicians were American Medical Association (AMA) members (1). That percentage has steadily decreased over the years. In 2019 there were only 132,133 practicing physicians or about 12.1% of physicians who are AMA members (2). According to Kevin Campbell (2) there are many reasons for this decline including:

- The AMA touts itself as speaking for all of us (physicians) – but rarely listens to any of us -- they work to fill their own pockets with dollars from big pharma and government.
- The AMA tends to have a narrow-minded political view and works to stifle any dissenting opinions (in an effort to continue to align with the government agencies that line the pockets of AMA executives with taxpayer money).
- The AMA has collaborated with the government to expand irrelevant and unfair payment codes (the hated CPT codes and ICD 10) -- this has significantly contributed to the disparity in pay for different specialties.
- The AMA has spent more (of dues paying member money) than almost any other company on lobbying in the last 20 years -- to a tune of \$347

million -- only the U.S. Chamber of Commerce and the National Association of Realtors have spent more.

- The AMA receives nearly twice as much money from the U.S. government as it does from membership dues, and has since the Clinton Administration when the AMA signed on to support price controls for physician services -- in exchange for Washington leaving it to the AMA to decide how the shrinking pot of money for physician payments would be divided up between medical specialties. (Yes, this is all about how the self-serving AMA determines CPT codes.) In 2010 alone, the AMA made 72 million in royalties and credentialing products sold to the U.S. government.

The AMA's "woes" are typical of many membership-based medical organizations that exist to fulfill a mission. Many professional organizations can be faulted for behavior similar to the AMA's, particularly ignoring physician members and lining their own pockets at the expense of their members and the patients they serve. However, regardless of size, achieving a mission often comes down to one thing-growth. In a report published by Wild Apricot (3) in 2020,

surveyors found 68% of organizations had difficulty growing their organization in 2019 – 11% of those shrunk, and 25% experienced no growth. The remaining 32% grew only 1-5%.

Not surprisingly, declining membership is associated with declining political clout. At one time AMA approval was critical in moving any healthcare proposal forward through Congress. Now it is at best an afterthought. The present “pay to play” attitude in Congress likely accounts for some of their declining influence. If an organization represents only a small fraction of the electorate, their influence is small.

The decline in professional organization clout can, at least in part, explain many of the onerous tasks that physicians and other healthcare workers must perform. For example, medical notes have become overly long and largely useless (4). Often the point of the note is difficult, if not impossible, to find. These clerical tasks may increase reimbursement but do not appear to contribute to better care or outcomes.

Therefore, combatting membership decline becomes important in improving medicine. Millennials and generation Z are not as likely to join organized groups as their predecessors (4,5). Additionally, not every recruitment strategy may work for a specific association or needs. Therefore, understanding the reasons behind a specific organization’s member churn can help indicate a path to explore. Retaining existing members is low-hanging fruit. It is more cost-effective to keep current members happy than it is to attract new ones. Canceling an unused membership doesn’t require a second thought, so targeting existing members with engagement campaigns showing them how to maximize their membership is important. Declining

membership is not a dire situation, but it is a reason to innovate. Organizations should rethink how to engage existing members without neglecting younger audiences.

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### **References**

1. Collier R. American Medical Association membership woes continue. CMAJ. 2011 Aug 9;183(11):E713-4. [[CrossRef](#)] [[PubMed](#)]
2. Campbell K. Don't Believe AMA's Hype, Membership Still Declining. MedPage Today. June 19, 2019. Available at: <https://www.medpagetoday.com/opinion/campbells-scoop/80583> (accessed 5/3/24).
3. Wild Apricot. 3 Ways to Grow Your Membership Org. 2020. Available at: <https://resources.wildapricot.com/2020-membership-growth-report> (accessed 5/3/24).
4. Sax PE. How Did Our Medical Notes Become So Useless? NEJM Journal Watch. January 2, 2019. Available at: <https://blogs.jwatch.org/hiv-id-observations/index.php/how-did-our-medical-notes-become-so-useless/2019/01/02/> (accessed 5/3/24).
5. Fry R. Millennials Are the Largest Generation in the U.S. Labor Force. Pew Research Center. 2018. Available at: <https://www.pewresearch.org/short-reads/2018/04/11/millennials-largest-generation-us-labor-force/> (accessed 5/3/24).
6. World Economic Forum. Chart: How Gen Z Employment Levels Compare in OECD Countries. 2021. Available at: <https://www.weforum.org/agenda/2021/03/gen-z-unemployment-chart-global-comparisons/> (accessed 5/3/24).