



What were they thinking?

Reflections on recent history, U.S. health care policy and the role of organized medicine

As part of the ongoing national debate over health care reform, hefty discussion continues within the medical profession, much of it under the aegis of the AMA and its 500+ member House of Delegates.

The AMA House has long been the most representative and comprehensive policy-making body in American medicine. Over many years and decades, the AMA House has developed, revisited and refined a comprehensive body of policies that form the basis for AMA'S legislative and regulatory initiatives, and for the AMA's responses to legislative and regulatory proposals put forth by others. The final national health reform legislation signed by President Obama in March 2010 includes the following salient features that the AMA found to be consistent with established AMA policy:

- Coverage extended to 32 million currently uninsured Americans
- Ban on insurers' denial of coverage for people with pre-existing conditions
- Ban on lifetime insurance caps

- Ban on cancellation for illness
- Mandate that parents' coverage be available to children up to age 26
- Measures to sharpen competition in the insurance marketplace
- Requirements for transparency and accountability of insurance companies
- Tax credits to enable small businesses to purchase coverage
- Subsidies for low-income individuals and families to purchase coverage
- Streamlined insurance claims processing
- Elimination of the Part D coverage gap ("the donut hole")
- Protections against government and third-party misuse of comparative effectiveness research to dictate treatment decisions or coverage
- Disease prevention and wellness promotion
- A floor for primary care Medicaid payments at Medicare levels

The AMA was also successful in improving the bill by removing a provision that would have imposed an arbitrary 5% cut in payments to high-end physician outliers in utilization and another that would have extended Medicare coverage to people as young as 55. The original bill included Medicare and Medicaid "enrollment fees" for physicians and would have taxed elective medical procedures. The AMA was able to eliminate all of these problematic elements from the bill before it became law. Officially, the AMA remained neutral on the "public option," which did not survive in the final bill.

Liability and anti-trust remain unaddressed

Of course, the final legislation is still inconsistent with AMA policy in important respects. Most notable is the absence of anything beyond lip service to liability reform. While the new law does provide still more funding for "demonstration projects" in liability reform, these provisions can hardly be taken seriously. They are transparently a sop to those many, including the Rhode Island Medical Society and the AMA, who believe that liability and anti-trust are the two principal forces distorting American health care – driving up costs, restricting access and confounding important efforts to improve quality and patient safety.

Despite the substantial shortcomings that persist in the bill, however, the AMA did not impose any litmus test or walk away from the table. Walking away was an untenable option, tantamount to voluntary self-disenfranchisement on behalf of all physicians. Instead, the AMA recognized that in a negotiation, getting 75% of your ask up front is something to affirm and accept in good faith as a basis for further negotiation.

Useful links for health system reform and federal regulations

From the AMA

www.hsreform.org
The AMA's comprehensive site on national health system reform.

www.ama-assn.org/go/arc
Presents state perspectives on health reform and other aspects of public policy from the Advocacy Resource Center of the AMA.

From the U.S. government

www.healthcare.gov
Includes a tool for consumers to enter profile information and find which insurers are offering individual coverage in their state. This

portal will be a platform for other information as well, and includes an "Implementation Center" link (at the bottom under "Resources") that provides easy access to pending health reform regulations.

From the U.S. Department of Health and Human Services Office of Consumer Information and Insurance Oversight

www.hhs.gov/ociio
This portal includes a tab for "Regulations and Guidance" that provides links to regulations, fact-sheets, information on grants, etc.