



Our Years-long Quest to Improve Our Country's Health System

Gerald E. Harmon, MD

A little more than a decade ago, long before the Affordable Care Act was even written in pencil on paper, the AMA launched the “Voice of the Uninsured,” a massive campaign to shine a light on the 50 million uninsured Americans and to affect change that would alter the course of our health system. I personally participated in it and literally “got the T-shirt” when I wore the shirt at Williams-Brice stadium in South Carolina for a photo shoot in the AMA Annual Report in 2008. We worked with both parties in Congress on the effort, and both Democrats and Republicans were open to our policy suggestions. In fact, many of our proposals showed up in recommendations from think tanks and in legislation on both sides of the aisle.

It was an effort grounded on a foundational principal: people without insurance live sicker and die younger. Today, after multi-year efforts to repeal the structures embedded in the Affordable Care Act, we are still being guided by that same North Star.

The AMA believes high-quality, affordable health care coverage should be available to all Americans to improve the health of our nation. While we are relieved that recent efforts that would have harmed patients and critical safety-net programs didn't advance in Congress, the status quo is not acceptable. We continue urging Congress to initiate a bipartisan exchange to address shortcomings in the current law.

The first priority should be to stabilize the individual marketplace to ensure Americans have access to quality, affordable health coverage. More than 20 million Americans currently have health care coverage because of the current law. And while this law is imperfect, a core principle for the AMA is to ensure that these individuals not become uninsured.

Earlier this year AMA outlined key objectives for health system reform:

- Ensure that individuals currently covered do not become uninsured and take steps toward coverage and access for all Americans
- Maintain key insurance market reforms, such as pre-existing conditions, guaranteed issue and parental coverage for young adults
- Stabilize and strengthen the individual insurance market
- Ensure that low/moderate income patients are able to secure affordable and meaningful coverage
- Ensure that Medicaid, CHIP and other safety net programs are adequately funded
- Reduce regulatory burdens that detract from patient care and increase costs
- Provide greater cost transparency throughout the health care system
- Incorporate common sense medical liability reforms
- Continue the advancement of delivery reforms and new physician-led payment models to achieve better outcomes, higher quality and lower spending trends

These objectives reflect policy passed by the AMA House of Delegates and were developed in consultation with state medical societies and specialty groups, and were reviewed by the Council on

Legislation and the AMA Board of Trustees. They were also validated by physicians in focus groups held in Philadelphia, Chattanooga, and Phoenix.

We know from experience that a partisan approach will not be sustainable. We are asking our elected leaders and the Administration to chart a course both Republicans and Democrats can support. Our measure of any policy change should be this: does it represent progress and is it an improvement?

As the debate continues, the AMA will continue to advocate for our principles and priorities and work with all members of Congress on sustainable solutions. The AMA is working to define—and advance solutions to—the problems that we know exist with the current law. At this time, we are focusing on efforts to stabilize the individual market, coverage gaps, cost sharing and affordability.

The AMA will continue its ongoing work to fix the problems and address gaps in our health care system. As physicians, we are trained and experienced in difficult conversations; let's put that expertise to work. Let us continue to play a leading role in improving our health system.

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