

## **How to improve U.S. health care in 2020 and beyond**

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As we approach the 2020 election, our national conversation will again focus on finding the right path forward to fix what ails our current health system. It is encouraging to hear so many people—candidates, policymakers, opinion leaders and others—asking the same foundational question: how can our nation provide the highest-quality and most affordable health care for patients?

The AMA strongly believes that every American should have access to meaningful, affordable coverage. We also believe we should build on our current system of coverage provided by employers, government, and individually selected plans so choice and competition benefit patients. This fits with our long-standing policies of pluralism, freedom of both choice and practice, and universal access for patients.

Preserving the ability of patients to choose the health plan that best fits their needs must be a priority. Also, retaining variety in the potential payer mix for providers while reforming payment and delivery processes is an essential element in fully covering the costs of care and ensuring practice sustainability.

Improving the Affordable Care Act (ACA) does not upend the model of employer-based health coverage – the predominant form of U.S. medical insurance for the nonelderly population for many decades. In short, health insurance should cost less and work better for those who already have it, and it should be much easier to obtain for those who don't.

A single-payer option is not a viable solution, because it is a one-size-fits-all approach that would ultimately reduce coverage options and eliminate patients' freedom of choice. It also would destabilize coverage for some 150 million people with insurance, which accounts for about 20 percent of the U.S. economy.

In determining the best way forward for the world's largest health care system, we should recall the ethical imperative to "first, do no harm." To fix imperfections of the ACA, we must extend coverage to the uninsured, not dismantle the existing coverage most Americans enjoy today.

To make the ACA more affordable for individuals and families, the AMA advocates:

- Expanding eligibility for tax credit offsets to premiums to five times the federal poverty level.
- Providing enhanced tax credit offsets to young adults while retaining the ACA's current formula, which is inversely related to income.
- Fixing the "family glitch" while lowering the threshold that determines whether an employee's premium cost is "affordable," which affects subsidies to buy coverage on health insurance exchanges.
- Supporting state-level efforts to expand Medicaid eligibility to 133 percent of the federal poverty level.

We must also take steps to correct the flaws in the ACA's individual-market risk pool, in which younger people without chronic health concerns are often reluctant to participate. The AMA backs efforts by states to adopt individual mandates while also expanding outreach efforts to inform patients about financial incentives they can secure to purchase coverage on the exchanges.

A permanent federal reinsurance market would further stabilize the individual market. Until such a program can be established, Section 1332 waivers for state reinsurance programs can fill the bill.

Physicians know that people who lack health coverage live sicker and die younger. The ACA provided the pathway to extend health insurance to everyone. Now is not the time to stray from that path, but to strengthen it to ensure we reach our destination: comprehensive, affordable universal coverage for all Americans.