

Since the American Medical Association (AMA) House of Delegates (HOD) adopted the 17 principles contained in Council on Medical Service Report 9 (A-98), “Empowering Our Patients: Individually Selected, Purchased and Owned Health Expense Coverage,” the AMA Council on Medical Service has presented numerous reports related to health system reform and expanding coverage to the uninsured. Following are links to the council’s 50 most influential reports containing health system reform policy refinements.

Council on Medical Service Reports on Health System Reform

1. Empowering Our Patients: Individually Selected, Purchased and Owned Health Expense Coverage (CMS Report 9, A-98)

This landmark report provides direction to the comprehensive AMA policy shift from advocating employer-sponsored insurance to individually selected and owned insurance as the preferred option. The recommendations address the tax treatment of health insurance, individual insurance market reforms, methods of employer contributions toward employee coverage, incentives to obtain coverage, and mechanisms for group purchasing and risk pooling.

www.ama-assn.org/ama/upload/mm/372/a98cms9.doc

2. Status Report on Increasing Access to the Uninsured (CMS Report 2, A-99)

This report provides an update on the characteristics of the uninsured and identifies relevant federal and state legislative reforms. The recommendations focus on eliminating barriers to access and encouraging effective outreach activities.

www.ama-assn.org/ama/upload/mm/372/a99cms2doc.doc

3. Socioeconomic Factors Influencing the Patient-Physician Relationship (CMS Report 7, I-99)

This report documents factors influencing the patient-physician relationship and concludes that individually owned health insurance can enhance the relationship. It recommends continued support for the patient-physician relationship and for individually owned insurance.

www.ama-assn.org/ama/upload/mm/372/i99cms7doc.doc

4. Critical Expansion of Medical Savings Accounts (CMS Report 10, I-99)

This report reviews the current status of medical savings accounts (MSAs), including reasons for disappointing sales. The report recommends legislative repeal of numerous restrictions on MSAs.

www.ama-assn.org/ama/upload/mm/372/i99cms10doc.doc

5. Tax Credit Simulation Project (CMS Report 16, I-99)

This informational report describes the technical issues of evaluating tax credit proposals and presents estimates from the first stage of the AMA-developed simulation model.

www.ama-assn.org/ama/upload/mm/372/i99cms16.doc

6. Principles for Structuring Health Insurance Tax Credits (CMS Report 4, A-00)

This report recommends the adoption of a series of principles to guide AMA support for tax credits. An appendix contains estimates of five health insurance tax credit scenarios.

www.ama-assn.org/ama/upload/mm/372/a00cms4doc.doc



- 7. Benefits and Limitations of an Individual Mandate for Individually Owned Health Insurance (CMS Report 5, A-00)**

This report discusses the advantages and disadvantages of imposing an individual mandate to purchase health insurance and recommends noncompulsory alternatives that could be used to compel individuals to voluntarily purchase coverage.

www.ama-assn.org/ama/upload/mm/372/a00cms5doc.doc
- 8. The Effects of Individually Owned Health Insurance on Risk Pooling and Cross Subsidization (CMS Report 3, A-01)**

This informational report discusses risk pooling, cross-subsidization and related concepts and seeks to dispel unwarranted fears about risk pooling under individually owned health insurance.

www.ama-assn.org/ama/upload/mm/372/a01report3.doc
- 9. Evolving Internet-Based Health Insurance Marts (CMS Report 5, A-01)**

This report reviews and supports the introduction of Internet-based health benefits systems, which have resulted in significant advances toward defined contribution arrangements.

www.ama-assn.org/ama/upload/mm/372/a01report5.doc
- 10. Impact of Eliminating the Current Threshold for Deductibility of Medical Expenses (CMS Report 5, A-02)**

This report describes the impact of the existing tax deduction for medical expenses in excess of 7.5 percent of adjusted gross income and reaffirms policy calling for tax equity for the health insurance costs of self-employed and unemployed persons.

www.ama-assn.org/ama1/pub/upload/mm/372/cms502ii.doc
- 11. Advocating Health Insurance Tax Credits (CMS Report 10, A-02)**

This report reiterates the AMA's resolve to advocate expanding coverage through refundable tax credits and individually owned insurance, and to favor definitively the use of tax credits over public sector expansions to cover the uninsured. The recommendations specify legislative, private sector and communication advocacy.

www.ama-assn.org/ama1/pub/upload/mm/372/cms1002.doc
- 12. Medical Savings Accounts and Health Care Coverage of Dependents and Children (CMS Report 3, I-02)**

This report examines incentives to use preventive services under MSAs and new MSA-style health plans and recommends that MSAs be allowed to offer first-dollar coverage of preventive services.

www.ama-assn.org/ama1/pub/upload/mm/372/cms3_pdf.pdf
- 13. Tax Relief for Physicians Serving Uninsured and Underinsured Patients (CMS Report 5, I-02)**

This report discusses arguments for and against supporting tax relief to physicians for providing uncompensated care. The recommendation supports continued exploration of alternative methods of compensation for physicians who treat indigent, uninsured or underinsured patients.

www.ama-assn.org/ama1/pub/upload/mm/372/cms5i02.pdf
- 14. Review of US Health System Financing (CMS Report 8, I-02)**

This report reviews ongoing AMA study of health system financing and highlights continued affirmation and refinement of AMA policy in support of individually owned health insurance.

www.ama-assn.org/ama1/pub/upload/mm/372/cms8_pdf.pdf
- 15. Health Insurance Market Regulation (CMS Report 7, A-03)**

This report proposes a more uniform, rational approach toward health insurance market regulation. It evaluates specific regulations and proposes principles for health insurance market regulation. Principles protect high-risk patients while allowing health insurance market innovation.

www.ama-assn.org/ama1/pub/upload/mm/372/cmsrpt7a03.pdf

- 16. Health Coverage Tax Credit Program Under the Trade Act of 2002 (CMS Report 11, A-03)**

This report provides a summary of the key provisions of the Trade Act of 2002. The recommendations encourage participation in and promotion of the Health Coverage Tax Credit program and expansion of state coverage options available in the program.
www.ama-assn.org/ama1/pub/upload/mm/372/cmsrpt11a03.pdf
- 17. Medical Care for Patients with Low Incomes (CMS Report 1, I-03)**

This report presents a refined version of the proposal previously developed by the council to address medical care for patients with low incomes, including those enrolled in Medicaid (CMS Report 8, A-03). The recommendations incorporate tax credits for acute care patients with varying cost-sharing obligations based on income and eligibility under the Medicaid program.
www.ama-assn.org/ama1/pub/upload/mm/372/cms1-i03.pdf
- 18. Health Reimbursement Arrangements (CMS Report 3, I-03)**

This report summarizes the 2002 Internal Revenue Service ruling on health reimbursement arrangements (HRAs), compares HRAs with MSAs and flexible spending accounts, and describes pending legislation on health savings accounts (HSAs). The recommendations promote the use of HRAs.
www.ama-assn.org/ama1/pub/upload/mm/372/cms3-i03.pdf
- 19. Comparing Health Insurance Premium Subsidies and Tax Credits (CMS Report 2, A-04)**

This report describes the many forms in which health insurance is and can be subsidized. The recommendations support the use of tax credits, vouchers, premium subsidies or direct dollar subsidies, when designed in a manner consistent with AMA principles for structuring tax credits.
www.ama-assn.org/ama1/pub/upload/mm/372/cmsreport2-a04.pdf
- 20. Federal Health Insurance Reserve System (CMS Report 3, A-04)**

This report evaluates the merits of creating a federal health insurance reserve system and describes the history and function of the Federal Reserve Board. The recommendation supports continued advocacy of the AMA reform proposal.
www.ama-assn.org/ama1/pub/upload/mm/372/cmsreport3-a04.pdf
- 21. Health Savings Accounts (CMS Report 6, A-04)**

This report describes the development of HSAs out of MSAs and compares HSAs to MSAs. It notes that the authorization of HSAs successfully achieved most of the AMA's legislative objectives for MSAs. Recommendations support measures to enhance the availability and appeal of HSAs.
www.ama-assn.org/ama1/pub/upload/mm/372/cmsreport6-a04.pdf
- 22. Options for Implementing and Financing Tax Credits for Individually Selected and Owned Health Insurance (CMS Report 4, I-04)**

This report evaluates ways to incrementally implement individual tax credits, summarizes alternative sources of financing for tax credits, and assesses the pros and cons of an individual mandate. The recommendations support targeted implementation and phased-in financing of tax credits.
www.ama-assn.org/ama1/pub/upload/mm/372/cms4-i04.pdf
- 23. Containing Catastrophic Care Costs (CMS Report 5, A-05)**

This report presents data on catastrophic costs and recommends physician involvement in implementing cost-containment policies and strategies, additional research into the most high-cost patients, and greater evaluation of approaches to cost containment and quality improvement.
www.ama-assn.org/ama1/pub/upload/mm/372/a05cms5.pdf
- 24. Update on the Individual Health Insurance Market (CMS Report 6, A-05)**

This report summarizes trends in the individual market and discusses how it might be transformed in the future. It critiques published reports focusing exclusively on shortcomings of the individual market. Recommendations support greater availability of health insurance on the individual market and encourage action against "sham" health insurers.
www.ama-assn.org/ama1/pub/upload/mm/372/a05cms6.pdf

- 25. Offsetting the Costs of Providing Uncompensated Care (CMS Report 8, A-05)**

This report enumerates the costs of uncompensated care and recommends redistributing subsidies to institutions that provide uncompensated care toward health insurance for the uninsured.
www.ama-assn.org/ama1/pub/upload/mm/372/a05cms8.pdf
- 26. Update on HSAs, HRAs, and Other Consumer-Driven Health Care Plans (CMS Report 3, I-05)**

This report provides an update of consumer-driven health care, outlines proposed “individual medical accounts,” and provides recommendations to further promote HSAs and HRAs.
www.ama-assn.org/ama1/pub/upload/mm/372/i-05cmsreport3.pdf
- 27. Reinsurance and the Health Insurance Market (CMS Report 4, I-05)**

This informational report describes reinsurance, discusses how it is used and describes several models that can be used to better understand the benefits and limitations of reinsurance policies.
www.ama-assn.org/ama1/pub/upload/mm/372/i05cmsreport4.pdf
- 28. Association Health Plans (CMS Report 5, I-05)**

This informational report discusses the gaps in employer-based coverage, provides an overview of multiple employer welfare arrangements and presents arguments for and against association health plans (AHPs).
www.ama-assn.org/ama1/pub/upload/mm/372/i-05cmsreport5.pdf
- 29. Health System Expenditures (CMS Report 1, A-06)**

This report compares administrative costs in the private and public sectors and concludes that many administrative costs incurred by the Medicare program are not counted as such. It recommends a consistent format for estimating administrative costs that facilitates comparisons.
www.ama-assn.org/ama1/pub/upload/mm/372/a-06cmsreport1.pdf
- 30. Individual Responsibility to Obtain Health Insurance (CMS Report 3, A-06)**

This report highlights the advantages and disadvantages of an individual responsibility requirement and discusses the costs of individually owned health insurance. The report establishes an income-related threshold for individual responsibility to obtain health insurance.
www.ama-assn.org/ama1/pub/upload/mm/372/a-06cmsreport3.pdf
- 31. Comparison of Selected International Health Care Systems (CMS Report 5, A-06)**

This informational report provides an overview of how the United Kingdom, Canada, Germany and Switzerland organize their health care infrastructures, and the challenges that arise from different funding structures and delivery systems.
www.ama-assn.org/ama1/pub/upload/mm/372/a-06cmsreport5.pdf
- 32. Store-Based Health Clinics (CMS Report 7, A-06)**

This report describes the characteristics of store-based health clinics and discusses their impact from the perspectives of patients, employers, insurers and retailers. It recommends a set of principles for establishing and/or operating store-based health clinics.
www.ama-assn.org/ama1/pub/upload/mm/372/a-06cmsreport7.pdf
- 33. Expanding Health Insurance Coverage to the Uninsured: 2007 and Beyond (CMS Report 5, I-06)**

This report highlights key elements of the AMA reform proposal that have been refined over the past eight years. It recommends continued refinement regarding covered benefits, the financing of care for high-risk patients, and in the estimation of the cost and coverage gains of implementing the proposal.
www.ama-assn.org/ama1/pub/upload/mm/372/i06cms5.pdf
- 34. No Child Left Uninsured (CMS Report 1, A-07)**

This report summarizes relevant federal and state activity and reviews AMA policy and advocacy efforts regarding children’s access to health insurance. Continued efforts on the part of the AMA to cover children are recommended.
www.ama-assn.org/ama1/pub/upload/mm/372/a07cms1.pdf

- 35. Update on Store-Based Health Clinics (CMS Report 5, A-07)**
This report provides an update on store-based health clinics, discusses adaptations physicians have made and recommends prohibiting third-party payers from waiving and/or lowering copayments only for patients that receive services at store-based health clinics.
www.ama-assn.org/ama1/pub/upload/mm/372/a07cms5.pdf
- 36. Adequacy of Health Insurance Coverage Options (CMS Report 7, A-07)**
This report discusses standard benefit packages. Consistent with AMA policy promoting choice, it recommends a framework for evaluating adequacy that provides enough guidance to minimize the incidence of “underinsurance,” and enough flexibility to permit individuals to choose their plans.
www.ama-assn.org/ama1/pub/upload/mm/372/a07cms7.pdf
- 37. Strategies to Address Rising Health Care Costs (CMS Report 8, A-07)**
This report identifies four strategies to address health care costs and achieve greater value: reduce the burden of preventable disease, improve efficiency of health care delivery, reduce nonclinical health system costs and improve decision-making processes.
www.ama-assn.org/ama1/pub/upload/mm/372/a07cms8.pdf
- 38. Health Insurance Coverage of High-Risk Patients (CMS Report 2, I-07)**
This report recommends support for the principle that health insurance coverage of high-risk patients be subsidized through direct risk-based subsidies such as high-risk pools, risk adjustment, and reinsurance, rather than through indirect methods that rely heavily on market regulation.
www.ama-assn.org/ama1/pub/upload/mm/372/i07cms2.pdf
- 39. State Efforts to Expand Coverage to the Uninsured (CMS Report 3, I-07)**
This report summarizes state reform efforts to expand coverage to the uninsured, and includes a series of principles for guiding the evaluation of state efforts to cover the uninsured.
www.ama-assn.org/ama1/pub/upload/mm/372/i07cms3.pdf
- 40. Trends in Employer-Sponsored Health Insurance (CMS Report 4, I-07)**
This report reviews trends in employer-sponsored insurance, identifies employer strategies to contain health care costs and discusses the Employee Retirement Income Security Act. The recommendations offer strategies that further support patient access to continuous health care coverage.
www.ama-assn.org/ama1/pub/upload/mm/372/i07cms4.pdf
- 41. Tax Treatment of Health Insurance: Comparing Tax Credits and Tax Deductions (CMS Report 5, I-07)**
This report details the tax code for health insurance and demonstrates the greater effectiveness of tax credits over tax deductions in expanding coverage. Recommendations support the use of tax credits as the most effective mechanism for enabling uninsured individuals to obtain health insurance coverage.
www.ama-assn.org/ama1/pub/upload/mm/372/i07cms5.pdf
- 42. Tax Implications of Eliminating the Employee Income Tax Exclusion for Employer-Sponsored Insurance (CMS Report 5, A-08)**
This report provides an overview of the tax treatment of health insurance and describes the tax implications of eliminating the exclusion. The recommendations clarify the payroll tax impact, guide states’ use of state tax exclusions and modify the tax code to support the self-employed.
www.ama-assn.org/ama1/pub/upload/mm/372/a-08cms5.pdf
- 43. Value-Based Decision-Making in the Health Care System (CMS Report 7, A-08)**
This report examines decision-making processes over the life span and related to diabetes, highlights the role of physicians and examines key obstacles to value-based decision-making. The recommendations include a set of principles to guide physician value-based decision-making.
www.ama-assn.org/ama1/pub/upload/mm/372/a-08cms7.pdf

- 44. Standardizing AMA Policy on the Tax Treatment of Health Insurance (CMS Report 8, A-08)**
This report identifies AMA policies that are inconsistent, or otherwise outdated or inaccurate, with the preponderance of related policy and concludes by making 14 recommendations to rescind or modify policies that update AMA policy.
www.ama-assn.org/ama1/pub/upload/mm/372/a-08cms8.pdf
- 45. Comparative Effectiveness Research (CMS Report 5, I-08)**
This report establishes a series of principles for creating a centralized comparative effectiveness research entity in response to a growing need for and imminent legislation concerning comparative effectiveness research. The principles were jointly developed by the AMA Council on Medical Service, the AMA Council on Legislation and the AMA Board of Trustees.
www.ama-assn.org/ama1/pub/upload/mm/372/cms5-i08cer.pdf
- 46. The Tax Treatment of Health Savings Accounts (CMS Report 7, I-08)**
This informational report studies the tax treatment of HSA contributions, earnings and withdrawals. The report concludes with a discussion of policy alternatives for the tax treatment of HSAs upon enactment of the AMA proposal for reform.
www.ama-assn.org/ama1/pub/upload/mm/372/cms7-i08hsa.pdf
- 47. Medicare Physician Payment Reform (CMS Report 6, A-09)**
This report provides recommendations to help ensure that alternative physician payment methodologies are designed and implemented in ways that do not disadvantage or disenfranchise groups of physicians or patients.
www.ama-assn.org/ama1/pub/upload/mm/372/a09-cms-rpt-6.pdf
- 48. The Patient-Centered Medical Home (CMS Report 8, A-09)**
This report presents recommendations to maximize the potential benefits offered by the medical home model without restricting patient access to specialty care.
www.ama-assn.org/ama1/pub/upload/mm/372/a09-cms-rpt-8.pdf
- 49. Geographic Variation in Health Care Cost and Utilization (CMS Report 2, I-09)**
This report provides an overview of research into geographic variation, discusses research limitations and emphasizes the importance of avoiding policy decisions based on limited data.
www.ama-assn.org/ama1/pub/upload/mm/372/i09-cms-report2.pdf
- 50. Health Insurance Exchange Authority and Operation (CMS Report 3, I-09)**
This report considers the potential regulatory authority to be delegated to the executive branch related to health insurance exchange organization and proposes principles for the operation of health insurance exchanges.
www.ama-assn.org/ama1/pub/upload/mm/372/i09-cms-report3.pdf

Of the 192 reports developed by the AMA Council on Medical Service over the past decade, 190 (99 percent) have been adopted or filed by the AMA House of Delegates (HOD). Visit www.ama-assn.org/go/cms to view all AMA Council on Medical Service reports adopted or filed by the AMA-HOD since the 1998 Annual Meeting.

