

Physicians: The ACA should be strengthened, not abandoned

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The AMA House of Delegates today adopted new policy to boost its push for universal coverage by improving the Affordable Care Act (ACA) while maintaining the Association's opposition to a single-payer approach to health system reform.

"Since the ACA was enacted into law in 2010, millions of Americans have gained health insurance. The policy question now is how to improve the law to insure even more," said AMA President Barbara L. McAneny, MD. "We need policies to make coverage more affordable for millions of Americans—both in the premiums they pay, as well as their cost-sharing responsibilities."

To advance the AMA vision on health care reform, delegates adopted recommendations of a report from the AMA Council on Medical Service at the 2019 AMA Annual Meeting to support:

- Eliminating the subsidy "cliff," thereby expanding eligibility for premium tax credits beyond 400% of the federal poverty level.
- Increasing the generosity of premium tax credits.
- Expanding eligibility for cost-sharing reductions.
- Increasing the size of cost-sharing reductions.

"The ACA is not broken, but it is imperfect," the council's report says. "Improving the ACA appropriately targets providing coverage to the uninsured population, rather than upending the health insurance coverage of most Americans."

The new policy aims to help the approximately 8.2 million uninsured who are eligible for premium tax credits but remain uninsured, as well as the 1.9 million who aren't eligible for premium tax credits because they have incomes greater than 400% of the federal poverty level.

“The AMA is pursuing sustainable, practical solutions. Building on the ACA would help cover the uninsured without disrupting the coverage of most of Americans. We will continue to put our patients first as we engage in these debates moving forward,” Dr. McAneny said.

The council’s report raises concerns about the cost of various Medicare for All proposals and how they would be paid for. The report notes that Medicare for All would increase federal spending significantly, with some estimates adding more than \$32 trillion to federal spending over 10 years.

The AMA acknowledged that equitable access to medical care is a core component of a basic human right to health care, and the AMA holds that physicians have an ethical responsibility to ensure that all persons have access to needed care. There are many pathways to providing patients with equitable access to medical care and the AMA supports a pluralistic approach to ensure that all people have access to health care.

Delegates also reaffirmed policy to support:

- | Fixing the ACA’s “family glitch” to help those currently unable to afford coverage offered through their employers for their families.
- | The establishment of a permanent federal reinsurance program.
- | Providing young adults with enhanced premium tax credits while maintaining the current premium tax-credit structure which is inversely related to income.
- | Working with state and specialty medical societies in advocating at the state level to expand Medicaid eligibility to 133% of the federal poverty level (138% of the federal poverty level, including the income disregard) as authorized by the ACA.
- | Extending to states the three years of 100% federal funding for Medicaid expansions that are implemented beyond 2016.
- | Educational and outreach efforts targeted at those eligible for Medicaid and CHIP, as well as improved and streamlined enrollment mechanisms for those programs.
- | State innovation—including considering state level individual mandates, auto-enrollment and/or reinsurance—to maximize the number of individuals covered and stabilize health insurance premiums without undercutting any existing patient protections.
- | Adequate funding for and expansion of outreach efforts to increase public awareness of advance premium tax credits.