4 ways the AMA has battled in court to preserve access to care

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The AMA works tirelessly to preserve and enhance patients’ access to care. Health insurance coverage, freedom of choice, freedom of practice, pluralism and universal access for patients are just some of the areas the AMA has a watchful eye on to ensure patients have the access to care they deserve and need.

Advocacy can mean lobbying for state or federal laws or regulations, providing model legislation or filing amicus briefs in court cases whose outcomes will dictate what patient access to care will look like going forward. The AMA and the Litigation Center of the American Medical Association and State Medical Societies help level the playing field in these potentially precedent-setting court battles.

Here are four key advocacy messages the AMA and the Litigation Center of the American Medical Association and State Medical Societies delivered to courts recently via friend-of-the-court briefs to make physicians’ voices heard in cases that made an impact on access to care.

**Uphold the Affordable Care Act**

The AMA, with 20 other physician organizations, filed an amicus brief that encouraged the U.S. Supreme Court to reject a challenge to the Affordable Care Act (ACA) and reverse the erroneous decisions below.
The plaintiffs were trying to invalidate the entire ACA because Congress dropped the law's individual tax penalty to $0. Learn more about what physicians told Supreme Court justices about the necessity of maintaining the ACA.

**Protect free and open communication with patients**

The AMA, the Oregon Medical Association and others in 2019 filed a lawsuit to block the Department of Health and Human Services (HHS) from implementing a harmful “gag rule” that hampered patient access to essential care.

The gag rule dictated what physicians practicing at facilities funded by Title X family-planning program grants cannot say, and must say, to their patients. Actions the Biden administration and the U.S. Supreme Court took this year put the kibosh on it. Find out more about the massive impact the 2019 rule had on patients' access to essential care.

**Don’t deter immigrants from seeking badly needed care**

After a Trump-era rule gave the government more leeway to deny visas or green cards for legal immigrants who used Medicaid, the AMA Litigation Center joined state and specialty medical societies in filing briefs in a number of court cases challenging the rule.

Earlier this year, the Department of Homeland Security (DHS) announced the government will no longer be defending the 2019 “public charge” rule and the U.S. Department of Justice dismissed appeals pending before the U.S. Supreme Court and 7th U.S. Circuit Court of Appeals. Learn more about how the rule would have “dramatically” increased “the
likelihood that lawfully present immigrants and their families will forego health and nutrition benefits to avoid negatively impacting their immigration status.”

Let states legislate how PBMs operate

As pharmacy benefits managers (PBMs) play an increasingly pivotal role in prescription-drug pricing for drug benefits administration, state lawmakers need to be allowed to govern how the PBMs operate to ensure transparency.

That’s what the AMA Litigation Center and Arkansas Medical Society told the U.S. Supreme Court in an amicus brief. Learn why the high court’s ruling allowing states to legislate certain aspects of how PBMs operate was a win for patients and physicians.

Read more about the AMA vision on health care reform, and learn about the cases in which the AMA Litigation Center is providing assistance and learn about the Litigation Center’s case-selection criteria.