



## **Key Health System Reform Actions Taken at the 2009 Annual Meeting of the AMA House of Delegates**

### **Health System Reform Principles**

- Adopted policy supporting health system reform alternatives that are consistent with AMA principles of pluralism, freedom of choice, freedom of practice, and universal access for patients.

### **Medicare Physician Payment Reform**

- Adopted a set of principles that should be upheld in the development of any Medicare physician payment reform efforts, including ensuring that reform efforts: promote improved patient access to care; are designed with input by the physician community; ensure payment rates that cover the full cost of sustainable medical practice; include participation options for all physicians; and ensure an appropriate level of physician decision-making authority over any shared-savings distributions.

### **Patient-Centered Medical Home**

- Clarified AMA support for the patient-centered medical home as a model for providing care to patients without restricting access to specialty care, and will urge the Centers for Medicare and Medicaid Services to work with the AMA and specialty societies to design incentives to increase care coordination among all physicians.

### **Right to Privately Contract**

- Included in the AMA's top advocacy priorities in 2009: the right of patients to privately contract with physicians; and the ability of physicians to collectively negotiate with health plans.

### **Medical Liability Reform**

- Adopted policy to press for effective medical liability reforms as part of comprehensive health reform legislation.

### **Eliminating Restrictions on Pre-existing Conditions**

- Adopted policy to support health insurance coverage of preexisting conditions with guaranteed issue in the context of an individual mandate.

### **Incentives Rather Than Penalties for HIT Adoption**

- Adopted policy cautioning policy makers on the high costs of adopting health information technology (HIT) and advocating for greater adoption of HIT through incentives to e-prescribe and implement and maintain electronic medical records (EMR), without penalty for non-adoption of these systems.

### **Physician Workforce**

- Adopted policy that enhancements to bolster the physician workforce must be part of any comprehensive federal health system reform, including advocating for expanded funding for entry and continued training positions in specialties and geographic regions with documented medical workforce shortages.



### **Medical Student Debt Relief**

- Adopted policy advocating for student debt relief through 100% tax deductibility of student loan interest.

### **Follow On Biologics**

- Adopted policy to make follow on biologics more available to patients and physicians (as a lower-cost alternative), while protecting patient safety and allowing a reasonable timeframe for FDA exclusivity and patent expiration.

### **Health Insurance Underwriting Policies**

- Adopted policy that urges insurance companies to make underwriting decisions based only on the presence of conditions that are valid predictors of morbidity and mortality.

### **Prevention and Personal Responsibility**

- Adopted policy to improve health and preventive care efforts by advocating for increased physical activity, proper diet and personal responsibility, and working with concerned organizations to achieve this goal.

### **Principles for Public Release of Physician Data**

- Adopted a series of principles addressing the public release and accurate use of physician data, including patient privacy safeguards, data accuracy and security safeguards, transparency requirements, review and appeal requirements, physician profiling requirements, quality measurement requirements and patient satisfaction measurement requirements.