**OHIO STATE MEDICAL ASSOCIATION HOUSE OF DELEGATES**

**Resolution No. 17 – 2020**

**Introduced by:** OSMA Medical Student Section

**Subject:** Refining OSMA Position on Healthcare Financing Reform

**Referred to:** Resolutions Committee No. 2

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**WHEREAS**, The OSMA’s mission is “dedicated to empowering physicians, residents and medical students to advocate on behalf of their patients and profession”; and

**WHEREAS**, Per Policy 63 – 1994 (Health Systems Reform), the OSMA supports “only those proposed changes in our health-care system that are in the best interest of patients and which assure that all Americans continue to receive high quality medical care”, and the OSMA supports that “(1) All Americans shall have access to health insurance; (2) The right of patients to choose their physician freely; (3) The right of patients and their physicians to make medical decisions; and

**WHEREAS**, The United States (U.S.) has not achieved universal health coverage and uses a multitude of privately-run for-profit health insurers to finance a significant portion of its healthcare, while countries that have achieved universal health coverage use single-payer systems or a mix of public financing with a highly-regulated set of health insurers1,2; and

**WHEREAS**, The current U.S. health insurance system results in significant financial barriers for patients to access healthcare, as evidenced by the large number of people who lack health insurance (28.6 million Americans, including 744,000 Ohioans had no insurance for all of 2018)3 and who are under-insured (23% of Americans were underinsured and 10% had gaps in coverage in 2017-2018)4; and

**WHEREAS**, Financial barriers to accessing healthcare, such as lack of insurance and under-insurance, are associated with increased morbidity, mortality, delayed care, and bankruptcy5–9; and

**WHEREAS**, The current healthcare system is incredibly expensive, as evidenced by the U.S. national health expenditure of $3.7 trillion (nearly 18% of GDP) in 201710 and approximately twice as much per capita as peer nations that provide universal coverage1,11; and

**WHEREAS**, The excess healthcare spending in the United States is chiefly due to increased administrative costs and higher prices12–16 and countries that have achieved universal health coverage have reduced expenditure by using proven-effective methods, such as simplified billing, global budgets, and negotiated drug prices15,17; and

**WHEREAS**, Nearly all economic analyses of universal, government-financed plans in the U.S., performed by academics and organizations from across the political spectrum, predict that these plans would reduce health expenditure while providing universal health coverage18; and

**WHEREAS**, The complicated billing structure in the U.S. is associated with physicians spending significantly more time and money on administrative tasks (e.g. communicating with insurance companies, hiring staff to handle billing, billing-driven documentation, pre-authorization forms) and these administrative tasks contribute to burnout19–23; and

**WHEREAS**, The bureaucracy of the current multi-payer system reduces patient freedom by limiting choice of physician24–27 and interfering with doctor-patient relationship28,29 ; and

**WHEREAS**, A previous transition from a free-market system maintained average physician compensation30; and

**WHEREAS**, The public is more satisfied with their healthcare system in countries that have achieved universal health coverage than in the U.S.2; and

**WHEREAS**, Over 70% of Americans support the federal government doing more to help provide health insurance31; **therefore be it**

**RESOLVED**, That the Ohio State Medical Association consider evidence-based proposals to universal health insurance that preserve the freedom of choice, freedom of practice, and universal access for patients; and, **be it further**

**RESOLVED**, The Ohio State Medical Association rescind Policy 11 – 2010 (Promoting Free Market-Based Solutions to Health Care Reform):

1. The OSMA promotes free market based solutions to improve access and cost effectiveness of health care delivery in the United States; and, **be it further**

**RESOLVED**, That the Ohio State Medical Association amend Policy 05 – 2011 (Universal Health Insurance Coverage) as follows:

1. The OSMA ~~reaffirms support for~~ supports universal health insurance access for all Americans ~~through market based initiatives to create incentives for the purchase of coverage~~.
2. OSMA and AMA will pursue legislative and regulatory reform to achieve universal health insurance access ~~through free market solutions~~; and, **be it further**

**RESOLVED**, That the Ohio State Medical Association rescind Policy 13 – 1995 (Privatizing Medicare):

1. The OSMA supports privatizing Medicare including the use of the medical savings accounts.; and, **be it further**

**RESOLVED**, That the Ohio State Medical Association rescind Policy 14 – 1995 (Privatize Medicaid):

1. The OSMA supports privatizing Medicaid including the use of the medical savings accounts. *Reaffirmed in 1996.*

**Fiscal Note:** $ 500 (Sponsor)

$ 500 (Staff)

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