

Diagnosing The Need For Health Care Reform

Dr. Todd Huffman & Dr. Richard Barnhart, for the Eugene *Register-Guard*, May 24th 2009

For most of the last century, no single group operated as a bigger obstacle to universal health care than organized medicine. Today, perhaps no single group stands more united in support of some form of universal coverage.

Previous to their lost battle against Lyndon Johnson and Medicare, the opposition of major medical organizations and individual physicians guaranteed doom for various state and presidential efforts to establish either a national health plan or other means to achieve universal health insurance.

Now, surveys reveal overwhelming numbers of physicians resentful towards the current crazy patchwork health care system, which fixes their reimbursements, regulates and too often denies patient care, and piles physicians with paperwork so unending and from so many directions the average doctor has little time leftover to challenge the status quo.

Add to all this the frustration felt at working for no pay coordinating care and providing care after hours, at struggling with the cost of health care insurance for their own employees, and at seeing their uninsured and underinsured patients go without recommended care, and what emerges is a prescription for widespread physician support of radical reform.

Over four-fifths of physicians now agree that either fundamental changes are needed in our health care system, or that it needs completely rebuilt.

On April 27th, forty-four national physician organizations wrote to Senate Majority Leader Harry Reid to outline their common goals and strategies “for improving health care delivery and making affordable, high-quality care available to all Americans.” The co-signatories included the largest groups representing America’s family physicians, internists, obstetricians and gynecologists, and surgeons.

The letter’s sentiments mirror the results of a national survey of physicians published in January by the *Journal of General Internal Medicine*, which found that only a small fraction of U.S. physicians supported leaving the U.S. health care financing system as it is. Nearly half favored either tax incentives or penalties to encourage the purchase of medical insurance, and four in ten preferred a government-run, single-payor, taxpayer-financed national health insurance program.

These findings challenge the public perception that American doctors are by and large unsympathetic to growing call for an overhaul of our costly and deeply unequal current health care system. Nine in ten physicians in fact agreed that every American should receive needed medical care regardless of ability to pay. Physician attitudes have undergone a marked turnabout in the last four decades.

The American College of Physicians, a national association representing 124,000 internists and internal medicine subspecialists, has been the medical organization perhaps most vocal in support of universal health care coverage. The ACP takes the position that “health insurance coverage and benefits should be continuous and not dependent on place of residence or employment status.”

In December 2007, the organization became the first and thus far only medical association to endorse a single-payor national health insurance system as a viable option to achieve universal health care. The only alternative option the ACP recommends is a private/public model, much like what the Obama administration proposes. The ACP warns, however, that this health care model will likely result in inequities in coverage, and higher costs when compared to a single-payor system.

Every other national primary care organization likewise strongly favors universal health care coverage. The American Academy of Family Physicians, a national association representing 94,000 family doctors, crafted a health care reform proposal in 2001 which advocates for “a national health system with a basic set of benefits offered to all individuals.”

The American Academy of Pediatrics, representing over 60,000 pediatricians nationwide, endorses the idea that “quality health insurance should be a right, regardless of income, for every child, pregnant woman, their families, and ultimately all individuals.” Nine in ten pediatricians recently surveyed said they wanted a health insurance program that would cover all children in this country.

And the American College of Obstetrics and Gynecology, a national association representing 52,000 obstetricians and gynecologists, has issued a national health care reform agenda entitled “Health Care for Women, Health Care for All”, which “call[s] on Congress and the States to cover all people in the U.S.”

ACOG says it best: “The consequences of unavailable or unaffordable health insurance are felt by all of us. Uninsured and underinsured patients delay or forgo needed care, turning treatable conditions into complex and expensive health care events, and increasing the cost of health care for everyone. And our fragmented health care system impedes progress toward the quality and safety goals on which we all agree. Everyone’s health security is at risk.”

Momentum among the nation’s primary care physicians and their organizations is clearly towards radical reform and universal coverage. Yet what of the attitudes of the various medical and surgical specialists, and their organizations?

Here is perhaps the biggest surprise. In July 2006, the American College of Surgeons, the American College of Cardiology, and the American Academy of Orthopaedic Surgeons joined the AAFP, the ACP, and the ACOG in endorsing the “Principles for Reform of the U.S. Health Care System”, which states in its Preamble that “health care coverage for all is needed to facilitate access to quality health care, which will in turn improve the individual and collective health of society.”

Locally, informal and unscientific polling finds physicians consistent with their colleagues nationwide in believing the nation overdue for a health care overhaul. Of the nearly sixty respondents, almost all supported the idea of universal health care coverage. Most local physicians voiced support for a single-payor, national health insurance system, provided an option existed for those who could afford it to purchase supplemental private insurance.

Local physicians were close to unanimous in diagnosing insurance companies and their lobbyists as today being the greatest obstacle to creating a universal health care system. Other perceived barriers noted by respondents included pharmaceutical companies, biased anti-reform advertising campaigns bought with insurance company money, and political opposition in large measure consolidated today within the minority national party.

Many respondents expressed an expectation that some physician colleagues, made wealthy in part by the status quo, would join efforts at resisting reform. The same status quo, of course, that finds nearly fifty million Americans lacking health insurance, being neither old nor poor enough to qualify for government-funded insurance, and having neither a generous enough employer nor sufficient resources of their own to pay for private health insurance.

While there remains significant disagreement among America's physicians at how best to do it, most recognize that the status quo must go. In its place must be created a health care system that is universal, high quality, innovative, and cost efficient.

During the past few decades doctors have become closely acquainted with managed care by way of the private insurance industry. Most have realized it to be as overbearing, impersonal, and laden with administrative burden as they always feared the government might be, all without the redeeming benefit of universal coverage. Something has to change, and soon.

America’s health care system is sick, and in immediate need of intensive care. No less urgently than everyone else, America’s physicians are calling for an ambulance.

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