After Long Debate, AMA Backs Individual Mandate

BY ALICIA ALTU
FROM THE AMERICAN MEDICAL ASSOCIATION’S ANNUAL HOUSE OF DELEGATES MEETING

CHICAGO – The diversity of opinion within organized medicine got a full airing when delegates to the American Medical Association House of Delegates were asked to consider whether to maintain support of an individual mandate for health insurance.

While the 325-165 vote was overwhelmingly in favor of reaffirming that policy, it was preceded by hours of rancorous debate.

“Delegates meeting: the diversity of opinion was fully two-thirds of the House said today our policy is good.”

Many delegates used the debate over the AMA policy as a surrogate for debate on the Affordable Care Act (ACA), while others viewed it as a platform for their dissatisfaction with the AMA’s support of health reform.

While concerns about the ACA still linger, majority support of the individual mandate represents a growing progressive tide within the physician community, according to Dr. Stuart Cohen, delegate with the American Academy of Pediatrics. “While the minority is very vocal and extremely articulate, I think we’re seeing a change in organized medicine based on changing employment trends and the needs, aspirations, and concerns of the more progressive, younger physicians,” Dr. Cohen told PEDIATRIC NEWS.

Policy Evolution

As far back as 1998, AMA promoted the idea that individuals with financial means should buy health insurance. That idea was formalized as organizational policy at the 2010 House of Delegates meeting; however, at that time, delegations from Kansas, District of Columbia, Florida, Georgia, and the American Society of General Surgeons (ASGS) dissented and offered a resolution to withdraw support for the mandate.

The main debate occurred over a 3-hour period in front of Reference Committee A.

Dr. Wilson reminded delegates that the organization’s long-standing position backing the individual mandate reaches back to before the most recent health reform efforts. “During that intervening time, there has been no additional evidence to suggest that we have another alternative,” said Dr. Wilson, an internist from Winter Park, Fla. “I would suggest that our decision in the middle of the last decade was a good decision. I think the need to stay with it is even more so now,” he said.

Reaffirmation Despite Opposition

On June 20, a day after the Reference Committee debate, that panel brought its recommendation to the floor. The committee recommended that the House vote to reaffirm current policy and reject alternative resolutions.

To accommodate more debate, House Speaker Andrew Gurman, a hand surgeon from Altoona, Pa., established a precedent. Delegates who wanted to express an opinion were asked to line up at microphones marked either “pro” or “con.”

Dr. Richard Warner of the Kansas delegation, at the con mic, offered a new amendment that called on the AMA to back states’ rights. “No matter what the court does, I think there is going to remain division in the country and division in the AMA about the role of the individual mandate, so probably the best solution to that is to allow a mandate to exist as policy but in control of states rather than at the federal level,” said Dr. Warner, a psychiatrist from Overland Park, Ga.

But Dr. Melissa Garretson, a Ft. Worth, Tex., pediatrician and AAP delegate, said that while physicians might be angry about the ACA policy, “I have 700,000 uninsured pediatric patients in Texas who are angry, too. The evidence has shown that mandating insurance coverage gives us the highest percentage of insured individuals in this country,” she said.

The Kansas amendment backing states’ rights was voted down by almost 60% of the delegates. A similar amendment seeking to give states flexibility was offered by another delegation but was ruled as out of order. The delegates backed this ruling and voted down the amendment.

In other news at the AMA House of Delegates meeting:

Medicaid as Block Grants

The AAP introduced a resolution calling for the AMA to strongly oppose block granting Medicaid. Dr. Garretson spoke on the need to maintain the federal-state partnership under Medicaid so that recipients can be ensured of basic benefits no matter where in the United States they live. “Right now, what this language says is that the state gets to decide,” she said. “Well, I live in that state where they could give you a you-know-what about the 1.1 million uninsured kids and they don’t want to do anything with Medicaid. That’s just not where they are.”

Dr. Marion Burton, also an AAP delegate, agreed. “For the AMA to go on record as supporting block grants would cause millions of children to be thrown under the uninsured bus,” he said. The resolution was referred to the board of trustees for a later decision.

Ban on ‘Bath Salts’

The House of Delegates adopted a policy that supports a national ban on “bath salts,” synthetic substances that can cause severe physical and psychological effects including paranoia, hypertension, tremors, hallucinations, and violent behavior. The substance contains compounds including methylendioxymethylamphetamine, and is sold at head shops nationwide in the form of crystalized or powdered bath salts that users eat, inject, or inhale. Some states have banned bath salts or are considering doing so.

Patient Counseling

Absent any further discussion or debate, the House of Delegates unanimously passed a resolution opposing any state or federal restriction on the topics physicians can discuss with their patients. The resolution was introduced in reaction to a Florida law restricting doctors inquiring about gun ownership, unless there is a related health or safety concern. The resolution states that such measures restrict the doctor’s first amendment rights and restrict the privacy of the patient-physician relationship.

Body Image and Healthy Eating

The Medical Students Section introduced several resolutions aimed at addressing the effects of the obesity epidemic on youth. One resolution, passed by a voice vote, encourages fast-food restaurants to offer nutritious items such as salads at price parity with sandwiches and fries. The same resolution discourages marketing incentives such as meal deals. Opponents argued the AMA should not interfere.

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| DATA WATCH |

| AMA's Operating Profits Were Up Almost 45% in 2010 |

| 2010: $23.9 million | 2009: $16.5 million |

| 2010: $23.9 million | 2009: $16.5 million |

| $40 | $30 | $20 | $10 | $0 | $-10 | $-20 | $-30 | $-40 |


Source: American Medical Association 2010 Annual Report

■ Frances Correa contributed to this report.

From the American Medical Association’s Annual House of Delegates Meeting