



**Statement on Health Care Reform
November 30, 2016**

Since 2011, the Louisiana State Medical Society (LSMS) has supported all efforts to repeal the Patient Protection and Affordable Care Act (PPACA) in support of a new national health care reform effort. Now, as 2017 fast approaches, it may bring change as President-Elect Trump and Congress take an extensive look at PPACA reform whether through a total repeal effort or a repeal and replace initiative. Either way, the LSMS stands ready to assist our Congressional Delegation and the Trump Administration during this immense effort. The LSMS has long advocated for health insurance coverage for all Louisianans, as well as, a pluralistic delivery system, freedom of choice, freedom of practice, and universal access for our patients. These same principles will guide our future advocacy efforts regarding the Affordable Care Act. The LSMS remains committed to improving health insurance coverage and health care access so that our patients receive timely, high-quality care, preventive services, medications, and other necessary treatments.

Below is a summary of the LSMS' current policy on health care reform. It is not intended to be exhaustive, but highlights key elements that will guide any upcoming discussions. The bottom line is that any proposal to reform the health care system should be consistent with the long-standing LSMS policy for covering the uninsured and expanding choice. The LSMS:

- Supports the development and implementation of a fiscally sound plan to address the need for access to quality medical care for the indigent and uninsured populations in the state.
- Supports states being given the freedom to develop and test different models for covering the uninsured.
- Supports the creation of a health insurance risk pool that would offer coverage to the uninsured, as well as, those who are ineligible for Medicaid and cannot afford individual coverage but could buy coverage at a group rate.
- Supports a pluralistic system of health care delivery wherein patients have multiple choices of health care financing mechanisms in an open market setting.
- Supports the freedom of choice when choosing health care and medical care delivery settings for patients and physicians.
- Supports a health care delivery system that provides value and cost effectiveness and is accountable to patients and not to government, insurance companies, employers, hospitals or physicians.
- Supports the creation of an employee based health coverage system, which provides freedom of choice to employees and their families in selecting and changing healthcare coverage.
- Supports the elimination of the current tax bias against individually owned and individually chosen health coverage plans and supports the creation of an economic market for family

owned plans with a fair premium rating system independent of employer or government mandates.

- Supports federal and state tax initiatives, as well as, third party payer and employer-based incentives for individuals to improve their health and lifestyle, which may include reduced insurance premiums for healthy lifestyle activities.
- Supports the establishment of a health insurance co-op to improve access to insurance for small business employees.
- Supports the utilization of Health Savings Accounts (HSAs) as one option in a pluralistic system for patient health care coverage.
- Supports including medical liability reforms in any new health care delivery reform plans.
- Supports appropriate and/or increased funding for graduate medical education in any new health care delivery model.
- Supports alternative practice models such as Direct Primary Care, which allow physicians to practice medicine in a manner, which reduces burdens and administrative overhead.
- Supports quality research and guidelines, but opposes the use of these guidelines as a justification for the rationing of patient care, the calculation of physician reimbursement, or the establishment of a standard of medical care.

Additionally, the LSMS:

- Opposes any requirement or mandate by state or federal government that individuals purchase health insurance.
- Opposes the imposition of price controls in our health care delivery.
- Opposes mandating employer provided health insurance coverage.
- Opposes the inclusion of any pre-existing condition clause in a health insurance contract as these clauses generally prevent the acquisition of affordable health care insurance.
- Opposes the inclusion of any lifetime cap on benefits in any health insurance contract.

Specific to Medicaid, the LSMS supports a Medicaid program which achieves the following:

- Provides access to quality and robust care to Medicaid recipients.
- Relies on funding sources, which are dedicated and stable thereby allowing the program to remain fiscally sound and sustainable even in times where the state of Louisiana is facing budget deficits.
- Empowers Medicaid recipients to own their own healthcare and make decisions about their healthcare needs by utilizing co-payments and deductibles which are commensurate with reimbursement allowed under federal and state law.
- Is privatized and calls for the following choices for patients; traditional insurance plans, managed care plans (HMO, PPO, etc.), benefit payment schedule plans, and purchasing pools to enable individuals to achieve group rate premiums.
- Provides incentives such as small business tax breaks, limited malpractice caps, or other non-reimbursement incentives for physicians who accept Medicaid patients.
- Provides complete financial transparency so that it can easily be determined if taxpayer dollars are being used in a manner which maximizes access to quality and robust care.