



Reform

STUDENT PRESIDENT'S MESSAGE

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We are in the midst of potential policy change from the current White House administration. If you have had your head in the books or been living in the hospital and haven't been following the news, here's a quick brief to catch you up!

Perhaps the most visible sign of the need for healthcare reform is that 46 million Americans are currently without health insurance. The

Council of Economic Advisors' projections suggest that this number will rise to about 72 million by 2040 in the absence of reform. Their study of the current system leads to a focus on two key components of successful healthcare reform: 1) genuine containment of growth rate of healthcare costs, and 2) expansion of insurance coverage.

Progress:

Children's Health Insurance Program Reauthorization Act – Signed into law on February 4, 2009, this act reauthorizes the State Children's Health Insurance Program (SCHIP) through 2013. It also expands the program, enabling states to enroll an additional 11 million children in the program.

American Recovery and Reinvestment Act – Among a wide variety of spending provisions and tax cuts, this legislation temporarily provides a 65% COBRA subsidy aimed at making health coverage more affordable to those Americans who lose their jobs. This act approves expenditure of over \$19 billion in computerized medical records with the hope of reducing costs and improving quality while ensuring patient privacy. Additionally, it provides \$1 billion in funding for prevention and wellness programs to improve America's health and reduce long-term costs, \$10 billion in funding for NIH research and facilities, and \$500 million to address shortages by training primary healthcare providers including physicians, dentists and nurses.

Administration's Aspirations:

- Reduce long-term growth of healthcare costs for businesses and government.
- Protect families from bankruptcy or debt because of healthcare costs.
- Guarantee choice of doctors and health plans.
- Invest in prevention and wellness.
- Improve patient safety and quality of care.
- Assure affordable, quality health coverage for all Americans.
- Maintain coverage when you change or lose your job.
- End barriers to coverage for people with pre-existing medical conditions.

The Administration believes their proposals will adjust incentives so that the best, not the most expensive, care is provided to patients. In order to accomplish this, they want to create the "MedPAC Program" comprised of an independent group of physicians and medical experts empowered to eliminate waste and inefficiency in Medicare.

Potential Problems:

There are definite concerns regarding the proposed reform. Mention of tort reform is completely absent, leading to concerns that overall expenses within the industry will not be decreased. Potential Medicare cuts threaten to further reduce physician reimbursement. Using Massachusetts as a potential example for the nation's future, some feel that there may be a redistribution of funds without reduction of costs. According to the Chairman of the Department of Emergency Medicine of Boston Medical Center and Boston University School of Medicine, Dr. Jon Olshaker, "the challenge that Massachusetts is facing is that the program is underfunded, reimbursing only 60-70% of the cost of care for the patient. Therefore, many hospitals and physicians won't accept patients with the insurance since they will lose money. The program, Commonwealth Care, removes previous subsidies to hospitals such as Boston Medical Center that previously helped care for the underinsured population, but since the state insurance also doesn't fully cover the patient, there is a huge gap. This, coupled with cuts in Medicaid, make delivery of affordable care to patients, extremely difficult for hospitals." Recent data out of Massachusetts suggests that patient volume in emergency departments is increasing. The assumption that people will go to their primary care provider (PCP) instead seems inaccurate, especially since there is a shortage of PCP's to cover all of these additional patients. Additionally, the state still has an uninsured population, which on a national level would still be extensive due to undocumented workers who would not be covered by their employer.

So what happens next? Medical students, go back to rounding and studying. Sleep when you can, eat when you can, and read the news...when you can.

References:

1. http://www.whitehouse.gov/issues/health_care/
2. <http://www.slate.com/id/2220222/>
3. http://www.whitehouse.gov/assets/documents/CEA_Health_Care_Report.pdf

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