

ASA PRINCIPLES FOR HEALTH CARE REFORM 2017

Preamble

The American Society of Anesthesiologists (ASA) and its physician anesthesiologist members are committed to providing safe, high quality and efficient care for patients undergoing anesthesia and surgery, and for patients requiring care in the intensive care unit, pain management, and palliative care. Advancing patient safety, enhancing clinical care delivery and improving patient outcomes are at the core of our profession. The ASA looks forward to working with the Administration and Congress to ensure that the advances made in care to our patients are sustained as legislative changes are proposed.

General Health Care Reform Principles

As the 115th Congress and the Trump Administration consider changes to the Affordable Care Act or other legislation related to access to health care, the American Society of Anesthesiologists wants to ensure that any proposed changes:

- **Maintain access to affordable, health care services** for all Americans by building on the best features of public and private coverage - including maintaining a robust employer sponsored insurance system - ensuring affordable coverage.
- Recognize and value **physician-directed care**, and the integral role physician's play in delivering high quality, cost-efficient patient care based on their advanced education, skills and experience.
- Advance changes to insurance products that achieve **improved outcomes** for patients, and expand affordable health care options while **reducing the regulatory burdens** for both patients and providers including:
 - Promoting insurance products **that are transparent and easily understood** by consumers so they are able to make informed decisions about which products will be most appropriate for their individual or family needs. Products should include information related to in and out of network payments, copays, deductibles and patient obligations.
 - Allowing **patient choice** of physician, insurer, and type of health plan, including health savings accounts;
 - Allowing **access to physician-led care regardless of the geographic location** of the

patients;

- Minimize the likelihood that patients will find that they have large gaps in insurance coverage, high co-pays and deductibles due to narrow networks by ensuring transparency of health plan benefits, reasonable minimum benefit standards and broad enough networks of facilities and providers to meet their health care needs.
- Strengthen efforts to **remedy shortages of critically important medications** needed for administration of safe anesthesia and **address access to affordable prescription drugs**.
- **Adopt common-sense medical liability reforms**, including protections for physicians who care for the most vulnerable patient populations.
- Provide payment levels for physician services are sufficient to ensure the long-term viability of physician practices; support bipartisan effort to repeal the Independent Payment Advisory Committee (IPAB) which, if left in place would jeopardize long term viability of physician practices.
- Improve quality, advance evidence-based practice and identify better ways to deliver care by **adequately funding needed research**. Critical research support is required to optimize perioperative care, critical care, palliative care, pain management, and brain health.
- Ensure that measures used to quantify quality, evidence-based practice and reduced costs for purposes of rating and paying physicians are **transparent and reported in a timely** manner so that physicians can modify practices to achieve the desired goals.
- Preserve and maintain a well-trained physician anesthesia workforce to meet the needs of primary and specialty care patients by promoting adequate and ongoing funding of **graduate medical education programs**.