



October 2009

Sent to Northern Ohio Congressional Representatives

As President of the Academy of Medicine of Cleveland & Northern Ohio (AMCNO), an organization representing more than 5,000 physicians in Northeastern Ohio I am writing on behalf of the organization and the physicians we represent on the issue of health care reform.

In July the AMCNO sent you a letter regarding H.R. 3200 (enclosed). Since that time, we have conducted a survey of our members that provides additional insight into concerns many physicians have with regard to health care reform. This survey was conducted to obtain a snapshot of the opinions of practicing physicians in the Northern Ohio area with regard to health care reform. Questions revolved around the type of insurance options to consider, Medicare and Medicaid participation decisions, utilization issues and insurance costs.

This survey did not contain a question regarding the issue of tort reform. This is due to the fact that the AMCNO did not believe that there was a need to address this question since we already have information from our membership in this regard. The AMCNO already has a strong stance on this issue and we believe that there is a real need for additional tort reform proposals both at the state and federal levels. In addition, there is verifiable data that physicians in the Northern Ohio community are still experiencing high medical liability rates and excessive claim filings and this issue must be addressed in any health care reform legislation under review at this time.

You will note that the respondents overwhelmingly opposed a government run single payer system; however, there appeared to be some support for a combination of a private health plan system with a government run (but not government subsidized) option. In addition, respondents overwhelmingly favored a mandate that everyone be required to purchase catastrophic insurance coverage.

Responses were mixed on supporting a mandate requiring employers with less than 10 employees to purchase health insurance for their employees; however, there was overwhelming support for the creation of a health insurance exchange to allow the uninsured or small business employees (less than 10 employees) to purchase health insurance. Responses were also mixed on the issue of how to pay for coverage for the under-insured and uninsured.

Respondents strongly favored reforms that would prohibit health insurance companies from cancelling or denying coverage due to health status or conditions as well as showing strong support for limiting health insurance company profits and overhead to 15%.

Over 85% of the respondents indicated that they participated in Medicare with over half of those respondents indicating that Medicare rates in their specialty were poor or unsustainable. In addition, over 40% of the

respondents indicated that if Medicare payments are cut by 21% (as the existing formula calls for on January 1, 2010) they would either reduce their Medicare patient load or reduce and/or eliminate seeing Medicare patients altogether.

Close to 88% of the respondents are currently taking Medicaid patients and of those over 70% noted that Medicaid rates in their specialty are poor or unsustainable. Over 35% of those respondents indicated that if Medicaid rates are cut even further they would either reduce or eliminate their Medicaid patient load.

Over 60% of the respondents agreed that physician driven over-utilization of services is part of the cost problem with over 87% of the respondents noting that patient driven demand is another part of the cost problem in American health care.

An overwhelming percentage of respondents believe that physicians practicing defensive medicine is a cost problem in American health care. This response, coupled with the need for medical liability data noted above illustrates a definitive need for the inclusion of tort reform as a part of the health care reform legislation.

In response to a final question, over 70% of the respondents believe that cost shifting (defined as charging insured or private pay patients more to compensate for uninsured or underinsured patients) is part of the cost problem in American health care.

I hope that you will review the survey in its' entirety as well as the previous letter sent by the AMCNO regarding HR 3200 and consider this information during the deliberations taking place at this time with regard to health care reform.

Sincerely,

Anthony E. Bacevice, Jr., M.D.
President
AMCNO

Enclosures
Survey
Letter regarding HR 3200