



AMERICAN OSTEOPATHIC ASSOCIATION

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March 26, 2010

Dear AOA Official Family:

On Tuesday, March 23, President Barack Obama signed the “Patient Protection and Affordable Care Act” (PPACA) (H.R. 3590) into law (Public Law 111-148). This brought to an end over 15 months of intense legislative activity to reform our health care system and marked the first time in our nation’s history that, as a condition of citizenship, all Americans are guaranteed access to health care coverage.

While the contents of the new law have evoked strong reactions, I think it is imperative that we take a moment to acknowledge the historic significance of this legislation. Since the early 1900’s, our nation has sought policies to improve the health of our citizens and increase the scope and effectiveness of our health care system. Presidents of both parties have sought fundamental and comprehensive reforms of our health care system. While their approaches were varied, and their successes were measured, every President since Theodore Roosevelt has recognized the need and importance of improving our nation’s health care system.

Throughout this 100 year journey there have been noteworthy changes to our health care system. The most notable were the creation of Medicare and Medicaid in 1965. Other significant policy changes include ERISA in 1972; the establishment of the Relative Based Relative Value System (RBRVS) in the early 1990’s; the creation of the Children’s Health Insurance Program (CHIP) and the Sustainable Growth Rate in 1997; and the creation of the Medicare Prescription Drug Benefit in 2003. Some of these changes have proven beneficial and effective while others have failed to meet their desired outcome. Regardless of their initial legislated versions, each of these initiatives has undergone change and revision since their enactment into law.

The AOA and the Board of Trustees have taken on the responsibility of representing our great profession during this debate with the seriousness and diligence it deserved. This single issue dominated our leadership activities like no previous issue in the modern era of the AOA. The Board conducted countless meetings both in person and by conference call to discuss policy and political developments in Washington, DC. We debated issues openly, taking into account the thousands of comments we received from our membership as well as the policies adopted by our House of Delegates over the last 30 years. The AOA also took great steps to reach out to our members to provide them with information and to seek their input, to wit: We conducted eight Town Hall Meetings; we posted and distributed every communication we sent to the U.S. Congress; and we responded to thousands of emails, phone calls, and personal inquiries from AOA members and non-members alike.

Ultimately, the AOA's stance on health care reform is based upon the policies established by its members. For more than 100 years the AOA House of Delegates (HOD) has provided leadership and guidance on health policy matters for our profession. As the representative body of the AOA, we are beholden to the policy directives established by this representative body. It is the voice of our members. Throughout this debate, the AOA carefully evaluated policies adopted by the HOD and weighed those against legislative proposals under consideration in Congress. I am proud of every DO serving in our 500-member HOD. Their work was the guiding light in our legislative and advocacy efforts over the past 15 months. All told, there are over 50 HOD policies that are consistent with policies in the new law. There are an additional 20 policies that are partially met by the PPAC legislation.

By relying upon these HOD policies, we were able to avoid the ideological and emotional arguments made on both sides of this issue in the public sector and focus solely on those proposals that were consistent with AOA policies. Our goal has always been the enactment of legislation that would improve the health care system for our members and, more importantly, the patients you care for each day. We believe that this legislation meets this goal on many fronts.

The decision on whether the AOA would support or oppose this legislation was a difficult one. In the final days of the debate we conducted several meetings to discuss the legislation and the AOA's response. In the end, on Thursday, March 18, the Board voted *unanimously* to support the advancement of the PPAC. In our letter, we stated:

We recognize that failure to advance H.R. 3590 likely means that comprehensive health care reforms will not be realized and our current health care system will continue to struggle to meet the demands placed upon it. For this reason, we believe that the U.S. House of Representatives should advance H.R. 3590, ensuring that our nation and the patients we serve benefit from those reforms that are included.

However, we strongly urge the House to reaffirm its commitment to achieving the enactment of provisions included in H.R. 3962 that are not included in H.R. 3590 and work with the Senate to advance those policies we believe are essential to ensuring the future success of any health care reform bill enacted into law. The AOA pledges our commitment to working with you and your colleagues to find solutions to those issues that remain unresolved.

I assure you that the Board recognizes that the AOA's work on behalf of our members and their patients is not done. There are many issues that remain unresolved. In fact, our letter was accompanied by a very comprehensive list of policies we believe deserve immediate Congressional attention. The most important of these is the enactment of comprehensive and long-term reforms to the Medicare physician payment formula. Without systemic reform of the Medicare payment formula, the benefits of reform legislation will go unrealized. Ensuring access to physician services is the most critical issue our health care system faces in today.

As I stated last July when you elected me your President, change is difficult, and the uncertainty of what lies ahead rightfully raises concerns. However, I urge each of us to resist applying a blanket of negativity to change. Our health care system, on its current path, is unsustainable and fails to meet the needs of patients and physicians alike. Today's system is fragmented, expensive and inaccessible to far too many people, whether they have insurance or not. Its current state didn't happen overnight, and it will not correct itself in the short-term. It will take years to transform our health

care system to one that is financially sustainable, is capable of delivering high quality care to all patients, and restores the patient-physician relationship to the core of our health care system. This legislation makes fundamental and important changes in our health care system, includes numerous provisions beneficial to physicians, and—most importantly—has an opportunity to ensure improved health for our patients individually and our nation as a whole. This is the AOA’s ultimate goal.

The osteopathic medical profession has a long and proud history of placing the patient at the center of the health care system, seeking to provide those services that will benefit the patient above all else. We also have a great history of providing care to the less fortunate among us. This was a tenet of Dr. Still, is a core mission of the AOA and our Colleges of Osteopathic Medicine, and remains one of the fundamental objectives of our profession.

Time will be the ultimate arbiter of the new health care reform legislation. However, I am confident that the AOA, based upon those policies adopted by our HOD, made the right decision.

Fraternally,

A handwritten signature in black ink that reads "Larry A. Wickless, DO". The signature is written in a cursive, flowing style.

Larry A. Wickless, DO
President