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Policy Experts Debate Healthcare Reform: Too Much or Too Little?

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March 16, 2011 (Washington, DC) — A session here at the American Medical Student Association 61st Annual Convention that began as an informative debate about recent healthcare legislation between health policy experts ended, for the most part, as an object lesson on the differences between fact and opinion. Or, as scientists often say, if you torture the data long enough, they will tell you anything.

The first speaker, Michael Cannon, director of health policy studies at the Cato Institute, a libertarian think tank in Washington, DC, presented his rationale for calling for the repeal of the Patient Protection and Affordable Health Care Act of 2010 (PPAHC).

Issue 1 was whether extending medical insurance coverage to the masses would actually save lives. Cannon stated that at least 1 published peer-reviewed article suggests that the answer is "no." The study, which looked at the 10 years after Medicare was first introduced, compared individuals initially covered by the program with those who were not. "There are improvements when you're talking about expanding coverage to select populations, like AIDS patients," said Cannon, but otherwise, he said, the health impact is negligible.

Issue 2 was whether PPAHC would reduce costs. "The president's own chief actuary of the Medicare program was asked while testifying before Congress if this is true, and he said 'no'," Mr. Cannon stated.

Issue 3 was whether PPAHC will help reduce the deficit. According to the opinion of the Congressional Budget Office, the answer to this question is, again, no, said Mr. Cannon.

He then appealed directly to his listeners by suggesting that because of the extraordinary expansion of governmental powers over healthcare decisions, physicians will have to spend much of their time lobbying on behalf of their patients. In fact, Mr. Cannon said, these new powers are so sweeping that "the law presents a threat to everyone's political freedom." An obvious example of this, according to Mr. Cannon, is the provision in the law referred to as the individual mandate, which is seen by many conservative groups as being unconstitutional.

Speaking in favor of the current reform was Robert Zarr, MD, MPH, FAAP, president of the American Academy of Pediatrics, DC Chapter, in Washington, who began by addressing the belief, held by many, that the healthcare system in the United States is second to none. To the question, "Do we have the best healthcare in the world?" Dr. Zarr answered, repeatedly, "no," showing a rapid succession of slides with annotated facts and figures highlighting the issues of overall life expectancy, infant mortality, preventive care, and duration of hospital stays. By none of these criteria is America number 1.

So, what are we really the best at? "Spending money," according to Dr. Zarr, "and most of this is accounted for by administrative costs" — costs incurred by the bureaucracy of hundreds of insurance companies and thousands of insurance plans.

In contrast, Medicare, although flawed, contains many of these costs by its very existence as a single-payer system, he said. "The overhead for Medicare is much lower than for-profit insurance," according to Dr. Zarr. In fact, 1 study suggests that \$400 billion could be saved if all Americans were covered by a single-payer system, he stated.

In consideration of the law already in hand, Dr. Zarr lauded the bill for extending coverage to millions of uninsured, for the funding of community health centers, and for providing subsidies for private coverage. If anything, he thinks the bill did not go far enough — he is a staunch advocate of European-style universal healthcare. "No country that has gone this way has ever gone back," he said, adding that it works, outcomes are better, and costs are contained.

Mr. Cannon and Dr. Zarr have disclosed no relevant financial relationships.

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