

American Medical Women's Association  
Position Paper on Principals of Health Care Reform & Women' Health

The American Medical Women's Association (AMWA) was founded in 1915 to support women in medicine and to promote women's health. AMWA members practice in all medical specialties and settings. As the national health care debate moves forward, AMWA is committed to ensuring that the needs of women patients are met under health care reform.

Women have a great deal at stake as our nation prepares to overhaul its health care system.

Women are particularly vulnerable to being uninsured or underinsured under the current system: they earn less than men, make up the majority of the part-time workforce, and are more likely than men to be insured through their spouses. Nearly twelve million women have no health insurance of any kind. Furthermore, women are the primary caregivers to our nation's children and dependent elderly, often fulfilling this role alone; therefore, a lack of coverage for women often translates into a lack of coverage for entire families.

In addition, women have diverse health needs which have been historically neglected by our health care system. Vital preventive screening services, such as mammograms and Pap smears, are not covered by many private insurance companies. Women patients present myriad health concerns which are unique to women (such as pregnancy), predominate in women (such as osteoporosis or depression), or manifest themselves differently in women (such as heart disease). Women's health care must reflect this complexity, and be as comprehensive and complete as that delivered to the rest of the population. Women's family roles must be recognized as potential barriers to their receiving care, and appropriate enabling services--such as child care and transportation--must reflect these responsibilities.

AMWA is committed to ensuring quality women's health care under health care reform through adherence to the following principles:

**Universal coverage**

All Americans need and deserve the security of universal access to the preventive, primary, emergency, and long-term services which will ensure their well-being throughout their entire lives, no matter where they live, where they work, or what they earn.

In May 1994, the Congressional Budget Office found that a partial-coverage plan (the "91 percent solution") would protect those with very high or very low incomes. The working class would still be at risk of losing health insurance coverage.

Americans need to know that the coverage they gain under health reform will never be taken away.

### **Basic Benefits Package**

Only by guaranteeing a specific, comprehensive benefits package can a health care reform plan truly improve the standard of American health care. Well-defined benefits are necessary to assess the impact of a plan on the populations it is designed to serve. In addition, without defined benefits, the actual cost of a plan would be impossible to determine. AMWA is equally firm, however, that health care legislation must not dictate the intervals at which any medical procedure is covered. Our body of knowledge about the efficacy of such techniques is constantly evolving, particularly in the area of women's health. The current debate over mammography's efficacy, for example, reflects the substantial gaps in our knowledge created by years of neglect. Health care reform must reflect this environment, and enable physicians and their women patients to make independent decisions according to their best **judgment**, based on available information.

Until a well-designed, randomized, controlled clinical trial is conducted in the U.S., AMWA maintains that mammography should be available to all women aged 40 to 49 at one to two year intervals, and annually after age 50. In addition, AMWA believes that Pap smears and pelvic exams should be covered for all sexually active women and all women over age 18. After three normal smears, the Pap smear may be performed every three years, but the pelvic exam should still be performed annually.

Any health care reform plan must guarantee coverage of the full range of reproductive health services needed by American women. Although AMWA is firm that health care reform must also include full access to family planning and contraceptives, the unfortunate medical reality for the foreseeable future is that more than a million women each year will need abortion services. Lack of funding necessarily leads to delayed or denied medical services, both of which substantially increase the medical risks to the pregnant woman.

### **Improved Physician and Patient Autonomy**

The current health care system's burden of paperwork and bureaucratic oversight must be eased, equipping health professionals to do what they do best: provide quality care to patients. Patients, similarly, must be empowered to choose physicians who are accessible, and with whom they are comfortable--not merely whomever they can afford.

### **Enhanced Tracking of Health Care Outcomes**

Health care reform offers the ideal opportunity to create new mechanisms for assessing the quality of health care delivery around the nation. As the scientific community, Congress, and patients themselves are finally acknowledging the cumulative damage done by historic neglect of women's health concerns, we must ensure

that the patient care mistakes of the past will not be repeated. Women physicians welcome the opportunity to serve on the new system's governing bodies in order to assure that appropriate outcomes data are assembled--ensuring improved health care for women.

## **Financing**

In order to assure universal coverage, AMWA believes that mandated employer benefits offer a practical and effective financing mechanism. It is the health care status quo, and not reform, which poses the greatest danger to businesses, particularly small businesses. Today's system pits small businesses' purchasing power against that of large corporations', resulting in incomplete--or nonexistent--coverage for workers, and even business owners themselves. The playing field for business must be leveled, with all players paying their fair share for the health care of the American workforce.

In addition, AMWA firmly supports the levying of substantial excise taxes on alcohol and cigarettes--\$2 per pack--in order to finance reform. These so-called "sin taxes" act as significant deterrents to those whose addictions cost the American health care system billions of dollars annually.