



Maine Medical Association

Charles F. Pattavina, MD, President | Robert J. Schlager, MD, President-Elect | Amy Madden, MD, Chair, Board of Directors
Gordon H. Smith, Esq., Executive Vice President | Andrew B. MacLean, Esq., Deputy Executive Vice President & General Counsel

MAINE MEDICAL ASSOCIATION ENDORSES BALLOT QUESTION 2 ON MEDICAID EXPANSION

FOR IMMEDIATE RELEASE WEDNESDAY, OCTOBER 11, 2017

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Manchester, Maine – During its regular meeting on Wednesday, October 4, 2017, the Maine Medical Association Board of Directors voted to support Citizen Initiative Question 2, *An Act to Enhance Access to Affordable Health Care* on the November 7, 2017 State General Election ballot.

“Covering every Mainer with adequate health care coverage is critical to Maine’s future,” said MMA’s President Charles Pattavina, M.D., an emergency physician at St. Joseph Hospital in Bangor. “With the federal matching funds available under the Affordable Care Act, this is a good deal for Maine,” he said. “It’s the right thing to do for the health of our patients and it will be an important financial boost for Maine hospitals, physician practices, and other clinicians who care for all of us,” noted Dr. Pattavina.

MMA’s Board of Directors is chaired by Amy Madden, M.D., who practices family medicine and geriatrics at the Belgrade Community Health Center, a federally-qualified health center in Central Maine. “I see patients every day who struggle to access necessary medical care or medications because they are uninsured or underinsured,” said Dr. Madden. “As health care costs continue to rise for everyone, we need to ensure that people have access to primary care and seek preventive services before their health care needs become high cost emergencies that are more difficult to treat,” she said.

“This vote by the MMA Board is consistent with our long-standing commitment to Medicaid expansion. We have to continue to bolster both public and private sector options to achieve our goal of universal coverage. This is a step in the right direction,” said Hani Jarawan, M.D., an internal medicine specialist at the Maine Medical Center,

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who chaired the MMA's 2016 working group that reviewed the Association's position on health care reform and produced a *Statement on Reform of the U.S. Health Care System* approved by the MMA Board in January 2017. The *Statement* is attached.

The Maine Medical Association, the state's largest physician organization, is a professional association of more than 4100 Maine physicians, residents, and medical students whose mission is to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine citizens, www.mainemed.com. The MMA represents members in all medical specialties, in all practice settings, in all geographic regions of Maine.

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Maine Medical Association Statement on Reform of the U.S. Health Care System

The Maine Medical Association (MMA) is a professional organization founded in 1853 and headquartered in Manchester, Maine representing more than 3900 physicians, residents, and medical students whose mission is to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine citizens.

The MMA believes that the current U.S. health care system continues to produce some of the world's most eminent clinicians and health care facilities who together provide some of the most advanced medical care in the world. But, it does not provide basic health care as well as many other developed countries and, therefore, is not serving our country or its people as well as it should. We face the problems with our current health care system in our daily encounters with patients. We believe that the United States can and must do better in providing health care to its people.

Our objective should be to achieve basic health care for every resident of Maine.

We support the "Quadruple Aim," a framework developed by the Institute for Healthcare Improvement describing an approach to optimizing the performance of our health care system. These core values are:

1. Improving the patient experience of care, including quality and satisfaction;
2. Improving the health of populations;
3. Reducing the per capita cost of health care; and
4. Improving the health and work life of health care clinicians and staff members.

Our health care system should strive to incorporate the following principles:

The Physician-Patient Relationship

1. Provide health care that is patient-centric and physician-directed.
2. Put the patient first and protect the sanctity of the physician-patient relationship, particularly respecting the physician's autonomy as advocate for the patient.
3. Promote the maximum possible choice in patients' selection of physicians.

Structure of the Health Care System

4. Support a strong and vital public health infrastructure that can collaborate fully with physicians and the health care system to advance population health.

Adopted by the Maine Medical Association Board of Directors on Wednesday, January 18, 2017
65th Annual Meeting, October 20, 2016

5. Emphasize prevention and provide systemic support for healthier lifestyles, through incentives for identified health risk avoidance.
6. Stress pooling of clinical risk rather than medical underwriting.
7. Be efficient and have the ability to restrain rising health care costs at a system-wide level in the least intrusive way possible.
8. Have the ability to integrate and coordinate services in order to reduce fragmentation and the division of medical care into "silos."
9. Improve quality and minimize errors by relying upon evidence-based medicine, benchmarking, and outcome measures driven by clinicians and administrators working together.
10. Promote transparency of health care cost, quality, and outcome data.
11. Reduce the burden of administration to the greatest extent possible and include a billing system that is streamlined and consistent, as well as a payment system that is prompt and outcomes oriented.
12. Make health information technology (HIT), including electronic medical records (EMRs), more user friendly and more focused on clinical matters, rather than financial matters, and completely interoperable in order to facilitate rather than impede communication and work flow among clinicians, patients, and health care facilities.
13. Include a rational means of resolving medical liability disputes in order to restrain defensive medicine.

Public Support for the Health Care System

14. Be politically sustainable by including everyone as a participant and, therefore, a stakeholder in supporting it.
15. Be simple and fair, such that every participant can understand it and perceive that its financing burden and benefits are distributed fairly.