

1                                   **American Academy of Family Physicians**  
2                                   **Reducing Financial Barriers to Care**

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5   Whereas, ***The Creed of the Family Physician*** states that *the patient*  
6 *is our first professional responsibility* and that *all Americans deserve*  
7 *high quality affordable care including treatment, prevention and*  
8 *health promotion, as well as access to health care for all,* 1 and

9  
10 Whereas seeking timely high quality care with a licensed primary care  
11 physician should be the cornerstone of any well-functioning, cost  
12 effective health care system, and

13  
14 Whereas one in three Americans now currently cite financial reasons  
15 for not seeking medical care in a timely basis 2, and

16  
17 Whereas increased participation in both employer-based and directly-  
18 purchased High Deductible Health Plans (HDHP) has shown to  
19 increase the number of people who cite financial reasons to delay  
20 care regardless of income level 3, and

21  
22 Whereas outstanding medical bills is a leading cause of bankruptcy in  
23 our nation, while most of those individuals filing for medical  
24 bankruptcy had private health insurance 4, and

25  
26 Whereas despite the implementation of the Affordable Care Act in  
27 2010, roughly 27 million Americans remain uninsured and 43 million  
28 under age 65 are considered underinsured 5, 6, and

29  
30 Whereas, it has been estimated that for every 1 million people who  
31 are uninsured, approximately 1,000 will die as a direct or indirect  
32 result of not having health insurance 7, and

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34 Whereas several key provisions of the American Health Care Act of  
35 2017 will further erode funding and access to care for low income,  
36 disabled, and elderly citizens,

37  
38 Be it resolved that the American Academy of Family Physicians will  
39 adopt a policy statement and a list of formal recommendations aimed  
40 to eliminate financial barriers to health care. Such recommendations

1 must be specific and address the logistical steps needed to  
2 fundamentally change how health care is financed. The  
3 recommendations must be broadly applicable and avoid grouping  
4 people based on age, income, medical complexity, employment  
5 status, disability, or geographic location.

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7 Be it resolved that the Academy will coordinate and work with other  
8 medical societies and associations, as well as utilize its resources  
9 and political influence to advocate to our local and national policy  
10 makers, our colleagues and the public we serve.

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