

1                   **American Academy of Family Physicians**  
2                   **Improved and Expanded Medicare for All**  
3                   **(Single Payer)**  
4

5   Whereas the cornerstone of a well-functioning health care system  
6   requires a robust primary care work force that provides timely, cost  
7   effective, comprehensive care to the entire community, and  
8

9   Whereas the multiple different third party payment systems currently  
10   in place in the United States, further compounds the problems of  
11   physician burnout <sup>1</sup>, quality, access, and cost (administrative costs  
12   estimated to consume 25-30% of all health care spending) <sup>2,3</sup>, and  
13

14   Whereas despite improvements and gains made with full  
15   implementation of the Affordable Care Act of 2010, roughly 27 million  
16   Americans remain uninsured and 43 million under age 65 are  
17   underinsured <sup>4,5</sup>, and  
18

19   Whereas, it has been estimated that for every 1 million people who  
20   are uninsured, approximately 1,000 will die because of not having  
21   health insurance <sup>6</sup>, and  
22

23   Whereas most Americans cite medical bills as a leading cause of  
24   filing for bankruptcy, while most of those who claim medical reasons,  
25   had private health insurance <sup>7</sup>, and  
26

27   Whereas one in three Americans cite financial reasons for not  
28   seeking medical care in a timely basis <sup>8</sup>, while increased participation  
29   in both employer-based and directly-purchased HDHP (High  
30   Deductible High Co-pay) Health Plans, creates a growing number of  
31   people who delay care regardless of income level <sup>9</sup>, and  
32

33   Whereas several key provisions of the American Health Care Act of  
34   2017 do not address administrative complexities and cost barriers,  
35   and will further erode funding and access for low income, medically  
36   complex, disabled, and elderly citizens, so therefore  
37

38   Be it resolved that the American Academy of Family Physicians will  
39   endorse a privately delivered, publicly funded system that will expand  
40   and improve our current Medicare program, while specifically

1 avoiding grouping people based on age, income, medical complexity,  
2 employment status, disability, or geographic location, and

3  
4 Be it resolved that although the Academy acknowledges the  
5 insurance industry may play a role in administering such a plan, it will  
6 specifically avoid investor owned corporations from profiting on  
7 residual moneys left after the delivery of medically necessary care,  
8 and

9  
10 Be it resolved that the Academy will utilize its resources, draw upon  
11 its knowledge of population health, and capitalize on its political  
12 influence to advocate for Improved Medicare for All with our  
13 colleagues, the public, and our legislators.

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