



## 50 Ideas to Make Health Care More Affordable, Accessible and Efficient

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### Major Observations

1. You can't legislate efficient health care from Washington, D.C.
2. America needs to move from a sick-care system to a health care system.
3. It's time to cut the umbilical that ties health care insurance to the workplace.
4. To inform consumers, it's time to pull back the curtain of mystery on medical pricing.
5. Paperwork is squeezing the life out of patient care. Let's set a national goal to limit overhead to 5% by 2013.
6. Technology: savior or enemy of affordable health care?

### The Ideas

#### *The Patient*

1. Create a "worker backpack" to allow individuals and families the option of receiving federal tax breaks to buy health care insurance independently from their employer. These policies can follow a family for a lifetime.
2. Create a "Consumer Report for Health Care" to provide consumers up-to-date and online information about medical pricing, including the costs of medicines at area pharmacies, exams, tests and treatments at physician's offices and clinics, hospital charges, surgical outcomes, and infection rates. Require health care providers that receive federal funds to participate.
3. Hearing loss affects 75% of the elderly, but treatment is expensive (\$1,400 or more) and generally not covered by Medicare or private insurance. Congress should enact a \$500 tax credit to help families afford hearing aids for themselves and family members.
4. Provide incentives to insurers and require government health programs to cover experimental treatments for terminally ill patients.
5. Establish a medication pool for children with cancer or chronic diseases. Many of these medications are unaffordable even for those with insurance.

#### *Prevention*

6. Prevention, prevention, prevention. The entire health care system – government, business, insurance and consumers – needs to be reassessed to focus more dollars on preventive care, from pre-natal to end-of-life.
  7. Encourage companies to require pregnant mothers to attend pre-natal classes and get pre-natal check-ups.
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## 50 Ideas to Improve Health Care

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8. Require health care insurers to provide discounts for individuals who demonstrate healthy choices, such as regular exercise, diet, smoking cessation and other preventive measures.
9. Create a national initiative to lower the costs of preventive tests, such as colonoscopies and CT scans.
10. Provide free immunizations for flu and pneumonia to Americans over 65 years of age.
11. Congress should develop tax credits for a broad range of wellness and preventive care.
12. Require that a portion of the earned income child credit be used for children's health care.

### ***Medical Professionals***

13. To end "cost-shifting," ensure Medicare and Medicaid reimbursements reflect the true cost of medical care, and adjust these rates annually for inflation.
14. Eliminate disparities in reimbursement between rural and urban health care facilities.
15. Require a co-pay for individuals who use emergency rooms for non-emergency visits.
16. Provide incentives for after-hours outpatient clinics for non-emergency care located near emergency rooms to reduce congestion in ERs.
17. Establish reasonable national medical liability limits for emergency physicians and medical personnel providing unreimbursed "charity care" in ERs.
18. Forgive student loans for doctors, nurses and skilled health care professionals who practice for a period of time in a community or county health care clinic.
19. Remove restrictions on Medicare reimbursement for hospital-based nursing school programs in rural areas.
20. Require all individuals, including those residing illegally in the country, to pay for a portion of their medical care.
21. Small practitioners often have difficulty obtaining a sufficient supply of immunizations. Steps must be taken to ensure that these providers have adequate supplies of these medications to meet the needs of their patients.
22. Reassess federal reimbursement for inpatient mental health treatment. The government has overreacted to the fraud of the 1980's, leaving hospitals without staff, facilities or sufficient security to treat mentally ill patients in their ERs.
23. To help rural hospitals afford electronic medical records systems, tailor the Veterans Administration's VISTA open source record system for use in rural hospitals.



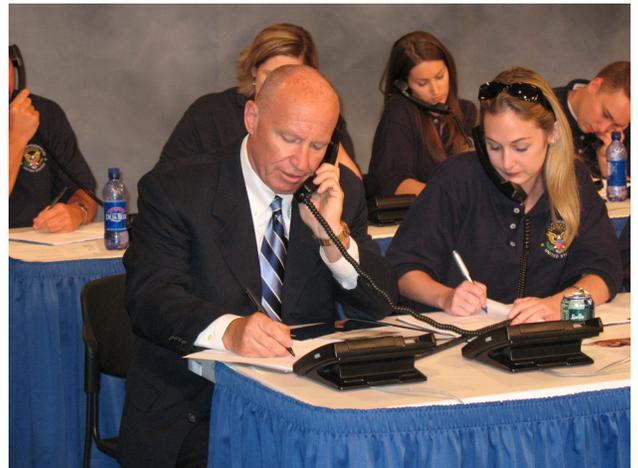
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24. Expand pharmaceutical patient assistance programs into emergency rooms for non-scheduled/non-controlled substances, so that hospitals can provide low-income and uninsured patients help with medications.
25. If a patient is initially admitted into an ER for emergency care, do not require the hospital to treat unrelated non-emergency conditions.
26. Reimburse physicians that assign care managers who successfully keep patients healthier by following their treatment regimen between office visits.

### ***Government and Medicare***

27. Expand “gainsharing” among health care providers to deliver better quality care more efficiently and at lower cost. Adopt “pay for performance” measures.
28. Medicare and Medicaid should provide preventive dental care.
29. Decrease delays in payments made to hospitals, physicians and medical providers from Medicare and private insurers.
30. Provide flexibility in serving the “near eligible” (those not eligible for Medicaid, but too poor to afford health insurance) within government assistance programs, especially for parents working multiple jobs while completing nursing school or pursuing a health care profession.
31. Mandate more uniform standards of eligibility across all government-sponsored health care assistance programs.
32. Government health care programs should consider the total impact of new regulation. For instance, before Medicare considers issuing a new regulation, first assess existing regulations to determine if there is a conflict or if it is necessary.
33. Re-assess the federal Health Insurance Portability and Accountability Act privacy provisions. While these are well-intended protections, they often hinder a physician’s ability to discuss important medical matters with immediate family members.
34. Medicare and Medicaid should reward beneficiaries who make positive lifestyle changes, such as smoking cessation, alcohol treatment and weight loss surgery.



### ***Insurance***

35. Allow health insurance to be purchased across state lines.
  36. Create a \$200 insurance deduction for policy holders who create and maintain a comprehensive and up-to-date family medical history.
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37. To reduce unnecessary delays between medical offices and insurers, the second attempt to resolve a pre-approval request or resolve a post-treatment payment dispute should be conducted by a medical professional on both ends of the communication. Delaying sound treatment and appropriate payment decisions hurts patients and drives up the cost of health care.
38. The lifetime cap on health care insurance is especially punitive to patients with rare or costly diseases, as well as families whose young children are diagnosed at an early age with severe illnesses. The lifetime cap should be increased to reflect the high cost of U.S. health care, adjusted annually to reflect health care inflation, and/or reset when a child reaches 18 years of age.
39. Standardize insurance forms and policies to promote increased transparency and easier comparison of plans.
40. Private insurers should cover preventive care measures when indicated by family history or medical examination. This coverage should be outside of the individual's deductible so that a person won't have to spend their savings to stay healthy.
41. Allow small businesses to join together to purchase health insurance across state lines without expensive federal health care mandates.
42. Expand the use and contribution limits for Health Savings Accounts.

### *Veterans*

43. Allow the Veterans Administration to contract with local providers in rural communities so that veterans can receive care closer to home.
44. Increase the income threshold so more veterans have access to Veterans Administration medical services.

### *Cost and Efficiency*

45. Create a national standard for electronic medical records, and expand the use of telemedicine.
46. Standardize the language used on medical billing and insurance claims for transparency and efficiency.
47. Rather than waste expensive but unused prescriptions, allow hospitals, nursing homes and other medical facilities to dispense, in-house, unused medications that are still sealed or can be verified as safe, such as blister packs.

### *Innovation*

48. Increase medical research at the National Institutes of Health 7% each year.
  49. Improve retention of expert and high level staff at the Food and Drug Administration to accelerate assessments of pharmaceutical and biotechnology submittals.
  50. To foster biotechnology, allow companies with 50% venture capital to be eligible for the Small Business Innovation Research Program.
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