

Health Care Reform

There are certain aspects of our Nation's health care system that truly need reform; costs are through the roof, the number of uninsured Americans is alarming, and access to quality care is difficult. However, a one-size-fits-all, nationalized health care system run by government bureaucrats is not the answer.

At 17 percent of our Nation's gross domestic product (GDP), Americans spend approximately \$2.5 trillion on health care each year. Due to the enormity of this sector and the potential impact on our overall economy, reform efforts will require a pragmatic and thoughtful approach, and all proposed changes deserve the upmost scrutiny and deliberation by policymakers.

The President and some leaders in Congress hope to have a comprehensive health care reform bill passed and on the President's desk by October 15, 2009. This ambitious timeline is alarming considering the challenges currently facing America. With this in mind, I want you to know the principles I have established, and what I would like to see come out of the health care reform debate.



Health Care Principles:

- **Uninsured Americans:** The number of uninsured Americans is unacceptably high and Congress can create policy to reduce that number by seeking out and enrolling individuals who are eligible for preexisting public plans (i.e. Medicaid); provide new coverage opportunities by pooling groups, such as small business health plans, to encourage more small businesses to offer health coverage; allow individuals to shop across State lines for health insurance; provide tax incentives to help the uninsured purchase health insurance; and encourage the utilization of health savings accounts and flexible spending accounts to prepare and pay for future health care needs.
- **Quality of Care:** For the high cost of care in the U.S., our health care delivery system lacks comparative quality. For example, preventable medical errors account for 44,000 – 98,000 deaths in hospitals each year, totaling \$29 billion in health care costs. Congress should implement policies that encourage value based delivery of care over the current quantity driven system. Quality of care delivered will be greatly improved through the expansion of Health Information Technology (i.e. electronic medical records, e-prescribing) and greater transparency in the overall system.
- **Access to Care and Choice:** Part of improving Americans' access to care and preserving the degree of choice is ensuring that health care decisions are made by the doctors and their patients, not by Washington bureaucrats. One of the most important goals is that despite reform efforts, people should be able to keep their private insurance if they are happy with what they have. Legislators should also ensure there are policies in place that increase the number of health care providers (i.e. primary care physicians, nurses), to meet the growing demand for health care services.
- **Wellness and Prevention:** Research shows that the number of individuals suffering from chronic diseases like diabetes and heart disease could be reduced through proper wellness, prevention, and disease management programs. Insurers, employers, and individuals will need to come together to coordinate care and promote healthy lifestyle choices through incentives and flexible coverage plans.
- **Cost of Care:** The success of the first four points depends in large part on reigning in the cost of health care in the U.S. Reducing duplicative procedures through the use of electronic medical records, and the implementation of anti-fraud and waste measures will help reduce overall costs, coupled with a robust medical liability reform policy.

For more information on health care reform, please visit my website www.adamputnam.house.gov.