

## TUESDAY GROUP

### MEDICAL RIGHTS AND REFORM ACT

*Protecting Doctor-Patient Relationship, Improving Quality, Lowering Costs, Expanding Access*

#### TITLE I. PROTECTING DOCTOR-PATIENT RELATIONSHIP

**Sec. 101 Guaranteeing the Doctor-Patient Relationship-** The Medical Rights and Reform Act guarantees the rights of patients to carry out the decisions of their doctor without delay or denial of care by the government. Our bill upholds the rights of individuals to receive medical services as deemed appropriate by their doctor to ensure all Americans have access to the care they need when they need it.

**Sec. 102 Preserving Health Insurance -** Currently over 160 million Americans have health insurance provided through their employer. Under other proposals in Congress, there may be an effort to eliminate or restrict employer-provided health insurance. Our bill will ensure that those plans are protected so that every American can choose to keep their current insurance plan.

**Sec. 103 Promoting Quality Through Evidence Based Research-** Research that evaluates and compares the implications and outcomes of health care treatments including procedures, therapies, pharmaceuticals and medical devices, will provide patients and health care providers with information to make informed decisions about the best course of treatment for each individual. Our bill will establish a governance structure for CER that is spear-headed by an independent commission that will work to ensure that CER is used to promote patient-centered care that best meets the needs of individuals and improves the overall quality of care while continuing support of medical progress.

**Sec. 104 Compassionate Access-** By providing terminally ill patients access to cutting edge treatments and drugs that have not been approved by the FDA due to their lengthy and extensive approval process, we can help save lives and give hope to patients and their families.

#### TITLE II. LOWERING THE COST OF CARE

##### **Sec. 201 Promoting Health and Preventing Chronic Disease through Wellness Programs**

Seventy-five percent of the nation's aggregate health care spending is on treating patients with chronic disease, yet the vast majority of these diseases are preventable. Keeping people healthy and preventing disease must be an important part of improving our federal health system. Employers, communities and health insurance plans should be encouraged to promote participation in effective prevention and wellness programs.

- ***In the workplace--*** with tax credits for both small and mid-sized employers when incorporating sound employee health management practices.
- ***For young people --*** with competitive funding for programs available to schools, community health centers and others.
- ***For individuals and families --*** incentivize participation through insurance premium reductions.

**Sec. 202 Providing Flexibility and Control to Lower-Income Families-** Families that are already eligible for public coverage but not enrolled in public plans currently offered should have the right to use their current public support to join a cost-effective private plan. Families who are not eligible for public programs but are struggling to afford insurance will receive tax credits to defray the cost of purchasing a health insurance policy. These policies will ensure that families who need help will have the same control as middle and upper income families in America in making their health care decisions.

**Sec. 203 Equalize Tax Benefits for Self-Employed-** Small businesses and self-employed individuals should have the same tax advantages that large employers receive for the purchase of health insurance.

**Sec. 204 Lawsuit Reform-** The proliferation of frivolous malpractice lawsuits threatens access to highly-skilled medical professionals, forcing doctors to practice defensive medicine. This drives up costs, denying access to care without improving the efficacy of care. Our policy will provide protections to safety net providers, stabilize compensation for injured patients, hold parties responsible based on their fault, ensure that meritorious claims are speedily resolved, reduce defensive medicine by encouraging doctors to follow evidence-based clinical practice guidelines, and encourage states to adopt "alternative to litigation" reforms such as early disclosure and compensation, administrative determination of compensation, and specialized health care courts.

### TITLE III. IMPROVING QUALITY, PROMOTING INNOVATION AND ENSURING ACCOUNTABILITY

**Sec. 301 Accelerate the Deployment of Health Information Technology-** By setting standards to ensure interoperability and incentivizing adoption, our bill will encourage the rapid deployment of health information technology to increase the quality of care by reducing medical errors, improving health care outcomes, and lowering costs.

**Sec 302 Public-Private Partnerships-**To avoid the Innovation Gap, where public research ends and before investors commercialize a promising discovery, a public-private partnership will foster a bridge between the NIH and biotech companies, universities, patient advocacy organizations, pharmaceutical companies and research institutions to accelerate the deployment of new research into the practice of medicine. By establishing an Independent Cures Acceleration Agency to fund promising discoveries, our bill will make grants available to applicants with or without access to private matching funds and can lead to the development of life-saving cures.

**Sec. 304 Eliminating Waste, Fraud and Abuse-** By strengthening Medicare's enrollment process for providers, expanding standards of participation and reducing erroneous payments, we can save billions in improper fraudulent payments. Implementing these common-sense changes will lower the cost of Medicare and ensure accountability to the American taxpayer.

### TITLE IV. EXPANDING ACCESS TO CARE

**Sec. 401 Small Business Health Options Program (SHOP)-** New mechanisms such as Small Business Health Plans, Cooperatives, Interstate Compacts, Catastrophic Coverage Plans that allow states to band together to obtain lower premiums for their employees, providing a tax credit for small business owners who pay for 60% of their employees' premiums and a tax credit for self-employed entrepreneurs to purchase health insurance, we can significantly increase the number of insured Americans, make health insurance more affordable, predictable, and accessible for small businesses and the self-employed.

**Sec. 402 State Innovation Program (SIP) -** Establish a new State Innovation Program that will provide incentives and rewards to States that reform insurance markets to better meet the personalized needs of patients. States would be encouraged to design programs that will help improve the individual and small group insurance markets through innovative models such as:

- **Universal Access Program (UAP)** to provide affordable health care coverage for the sickest patients and people who have preexisting medical conditions. A Universal Access Program could include a sustainable reinsurance program or a functioning state high-risk pool.
- **Health Plan Finders** that provide patients with the tools to easily find the right health care coverage that best meets their needs.
- **Small Business Health Plans** that allows states, small businesses, and other organizations to increase their purchasing power by banding together and offering health insurance at lower costs.

**Sec. 403 Dependent Children** -By allowing young people up to age 26, who otherwise may not choose to purchase insurance, access to their parent's health insurance, we can help to reduce the number of uninsured by at least 7 million.

**Sec. 405 Expanding Rural Care-**To ensure access to health care in rural areas, our bill will improve and expand the National Health Service Corp, expand access to care for rural veterans, establish a program that provides loans to eligible hospitals for residency training programs in primary care and reauthorize Area Health Care Centers.

**Sec. 406 Health Savings Accounts (HSAs) -** Americans who directly control health spending using a tax-deferred HSA will take a much greater role in their health care decisions, patient compliance and choices for end of life care if they control an account dedicated to this purpose which can also become part of their retirement savings or estate for their children. By expanding and improving Health Savings Accounts to give more Americans more control of their health care decisions we will allow more flexibility for HSA account holders to purchase health insurance, access preventative drugs and save for the future.

**Sec. 407 Ensuring Physician Access for Medicare Beneficiaries-**Every year, Medicare physicians face drastic cuts to their reimbursements as a result of the flawed Sustainable Growth Rate (SGR) formula that is used to calculate these rates. Medicare payment reform is essential in preventing further cuts from taking place and to ensure that all Medicare patients continue to have access to the doctors and care they need. Our bill will give physicians and seniors long-term peace of mind and address the SGR by replacing the SGR with the Medicare Economic Index (MEI), which is Medicare's measure of the increasing costs of providing medical services. Our bill rebases the SGR (fills in the hole) for 1 year then repeals the SGR and switches to MEI.

**Sec. 408 Strengthen Health Care Workforce --** Promote policies to ensure a strong health care work force, including primary care doctors and nurses, is prepared to care for the specific health needs of Americans.