

A Universal Healthcare Proposal

The ACA is overly complicated, doesn't cover everyone and doesn't truly reduce costs. We already have the template for a true universal healthcare system that can cover all and reduce costs. It is part of our Medicare system. The Medicare Advantage program of subsidizing private health insurance can become the base for our new system.

Private insurers fight reform in order to protect profits. In order to get them on board, a way must be found to give them some profit, yet control costs. Health care providers complain of regular Medicare not fully reimbursing them for their costs, so they must feel a new system does this less more of them refuse to participate. And the business community must have the burden of health insurance reduced so as to make them more competitive in the world market. All of this can be done within the framework already in existence.

The key is to consolidate the disparate government and private plans into one system of multi tiered plans that covers everyone's basic needs, yet allows for freedom of choice, and eliminates unwieldy public and private bureaucracy. What follows is my plan for overhauling a healthcare system that does the least for the most amount of money.

1) Put together a basic healthcare plan with defined benefits focusing on preventative care that all insurance companies would have to provide. In this pursuit it should have no deductibles, although a level of co pay should be established to limit abuse of the system. There should also be a limit on out of pocket expenses. This plan would be fully funded by the government and paid directly to the insurance company of each persons choice. It would be funded by an increase in the current Medicare tax, retaining the current flat percentage based on income, and deducted from a persons paycheck. Those currently in the Medicaid and Medicare system would be rolled into the new system with a 100 percent subsidy. Those with non employment income above a certain amount would pay into the system as part of their yearly income tax payment.

2) Above this basic plan, insurance companies could provide more comprehensive plans at an additional cost, much as is currently done, although these plans must be simple and comparable so that consumers can make an informed choice and providers need not retain unnecessary staff to wade through complicated language and conditions.

3) Insurance companies will pay into a catastrophic pool that will kick in once someone has exceeded their policy limits. Thus the responsibility for the seriously ill falls on all.

4) Businesses would be allowed to negotiate prices on behalf of their employees and sign with one insurer for all in the case of premium plans. Thus the current system of purchasing health insurance through an employer or having it provided as part of a benefits package could be retained. Non profit groups could also act as an insurance pool for those not receiving a benefit from work.

5) Every citizen will have to choose a health insurance company to provide their coverage. Each state can contract with a single health insurance company to ensure that insurance is available for everyone in the state or set up their own insurance company to be run as a public utility. A person can change their provider or coverage level at any time and does not have to be part of their employers pool.

This proposal should help streamline a system that is already largely in place and familiar to many. The bureaucratic nightmare that ruins our current system would be largely eliminated. There are details to work out for sure, but with all the major players of our current system benefiting, these details can be worked out, especially if the threat of implementation with or without their help is serious.

Questions or comments on this proposal should be sent to:
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