

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. Compassionate Access- By providing terminally ill patients with optional 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 Equalize Tax Benefits for Self-Employed- Self-employed individuals should have the same tax advantages that large employers receive for the purchase of health insurance.

Sec. 203 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.

Sec. 204 Providing Flexibility and Control to Lower-Income Families-Low – income families who are not eligible for public programs 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 options as middle and upper income families in America in making their health care decisions.

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 taxpayer.

TITLE IV. EXPANDING ACCESS TO CARE

Sec. 401 Small Business Health Options Program (SHOP)- By allowing small businesses 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 like:

- **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.
- New mechanisms such as **Small Business Health Plans, Interstate Compacts, Catastrophic Coverage Plans** that allow 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. 404 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.