Problem: Health care costs are increasing faster than any other basic service in our society. Runaway cost is the primary barrier for many Americans without health insurance and is heightening the risk that those who have insurance might lose it. The average American household spends about \$3,510 on premiums and medical bills, which does not factor in lost wages and taxes for public health programs.

Solution: Too many health care dollars are wasted because of excessive litigation, lack of consumer input, unnecessary and repetitive tests, low-quality care and bureaucratic paperwork. These costs are then passed on to consumers. By reforming medical liability laws, promoting the efficient use of technology and eliminating bureaucratic red tape, we can drive down the cost of health care.

- Inform and empower consumers
- Improve patient safety and quality
- Use innovative technology efficiently
- Reform the medical liability system
- Reduce premiums by strengthening recovery rights of health plans
- Reduce bureaucratic red tape and burdensome regulations
- Curtail waste, fraud and abuse in federally funded programs

Impact: Estimated savings to the health care system of \$137 billion annually, which translates to \$500 per man, woman and child in America.

Problem: 43 million Americans are uninsured at some point in any given year. Of those, 21 million are without insurance for a year or more. The number of uninsured Americans is a chronic symptom of systemic problems and impacts not only those without insurance, who generally suffer from poorer health, but also drives up costs for everyone.

COVERAGE: Insurance for Millions More

Solutions: Cover more Americans by targeting reforms to specific needs; developing new insurance options; marrying new subsidies with systemic improvements that allow for greater choice and competition; and optimizing existing public programs.

- Provide new financial assistance and tax credits to make insurance more affordable
- Market Reform Alternatives: Insurance Market Reform or Association Health Plans
- Remove barriers to allow for new multi-state pooling options
- Support and extend last-resort insurance plans
- Make sure Health Savings Accounts (HSAs) are user friendly and widely available
- Create incentives for young adults to purchase lifetime, portable insurance
- Improve enrollment in existing public programs
- Expand coverage options for low-income entrepreneurs and self-employed individuals

Impact: 17-25 million more Americans will have insurance.

Problem: Insuring more Americans is an important goal, but making sure those without insurance still have a safety net of care must also be a fundamental measure of success. Currently, safety net care is in short supply and sometimes is not able to provide a full range of services.

Solution: Provide high-quality care to anyone who lacks insurance coverage and cannot afford to pay for health care by strengthening our existing safety net system and providing the staffing, legal protection, and resources necessary.

- Increase the number of Community
 Health Centers (CHCs) by providing
 new funding for systems that serve the
 uninsured
- Increase access to specialty care within safety net systems
- Make prescription drugs more affordable and available within safety net systems
- Encourage more doctor and provider participation in the safety net system
- Reduce regulatory burdens and enhance the provision of care

Impact: 5 million more Americans will have access to safety net care. Quality will be better for all patients.



Personalized solutions to America's health care challenges

Our nation's health care framework is at a moment of extraordinary challenge and opportunity.

The best health care in the world is delivered in America. At the same time, a perfect storm of conditions have combined to push health care prices beyond the reach of many Americans.

There is no silver bullet solution to this complex array of challenges. Republicans have successfully passed bills throughout the 108th Congress that have and will make health care more accessible, affordable, efficient and consumer-friendly. But we are not satisfied.

Health care costs are increasing faster than any other basic service in our society; about 21 million Americans from all walks of life are without insurance for a year or more; and the safety net of care for uninsured and low-income individuals is worn thin and sometimes does not provide a full range of services.

The Senate Republican Task Force on Health Care Costs and the Uninsured has engaged in an intensive, six-month effort to better define the problems and their root causes, review existing proposals, and develop creative new solutions.

Our recommendations address three priority goals: to make care more affordable, cover the uninsured and strengthen the safety net for those who fall through the cracks.

Cumulatively, the recommendations in this package would result in annual savings to our nation's health care system of \$137 billion, insurance coverage for 17-25 million more Americans and access to safety net care for 5 million more uninsured individuals.

We are pleased to present these recommendations and hope this product will serve as a blueprint for decisive action both this year and for the next congressional session.

Senator Judd Gregg, CHAIRMAN

Task Force Principles

Address Rising Costs and Enhance Access to Affordable Health Care and Insurance

Target Insurance Assistance to Those Who Need It Most

Strengthen the Safety Net of Care for Those Who Need It Most

Build on What Works Well

Empower the Health Care Consumer

U.S. Senate Republican Task Force on Health Care Costs and the Uninsured

Task Force Members

Judd Gregg (NH) Don Nickles (OK)

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Jeff Sessions (AL)

John Cornyn (TX)

Gordon Smith (OR)

Mike Enzi (WY)

Olympia Snowe (ME)

Chuck Grassley (IA)

Jim Talent (MO)

George Voinovich (OH)

Jon Kyl (AZ)

Orrin Hatch (UT)

Cost, Coverage, Care



Personalized Solutions to America's Health Care Challenges

U.S. Senate Republican Task Force on Health Care Costs and the Uninsured

Senator Judd Gregg, Chairman

