A proposal to reform America’s broken healthcare industry

A Federal Healthcare Insurance Agency (FHIA)
A single-payer trust fund paid for by an employee-employer payroll tax

An FHIA would repeal and replace Affordable Care, Medicare, Medicaid, and Veterans Affairs medical. The national healthcare replacement system means:

1. FHIA would not own or operate healthcare facilities, employ health care professionals, or make medical care decisions.
2. All healthcare, dental, hearing, vision, and prescription drugs would be provided by existing private, nongovernmental businesses competing “for profit.”
3. The FHIA trust fund would pay for the healthcare of any person in the United States regardless of age, citizenship, employment, ethnic origin, gender, health, military service, race, or religion.
4. Individual care costs could be controlled by a modest annual deductible.
5. No contracts, no mandates, choose your healthcare provider. The provider bills FHIA.
6. All foreign national healthcare services would be billed to the patient’s home country.
7. **FHIA would not directly replace or prevent private healthcare insurance.**
8. All American healthcare consumers, hospitals, doctors, seniors, veterans, and especially employers have a vested interest in promoting an FHIA, an independent establishment of the executive branch of the U.S.

A not-for-profit FHIA would provide everyone in America equal healthcare access with substantial cost savings:

1. Negotiated drug prices
2. No advertising, no profit
3. No insurance lobbying costs
4. No employer insurance mandates
5. No state insurance commission costs
6. Reasonable executive salary structure
7. Total population insured reduces risk/cost
8. Employer healthcare insurance eliminated
9. Healthcare providers’ overhead costs reduced

Single-Payer in America today
1. Federal general tax revenue pays for the $168 billion annual VA cost for 350,000 doctors, nurses and administrators. The VA owns 1200 clinics, hospitals, medical centers, and long-term care facilities. A socialized medicine model.
2. Federal and state general tax revenue pays for the $430 billion annual cost of Medicaid healthcare for 60 million low income families.
3. The Medicare trust fund pays 80% of the cost of healthcare for seniors (65+) and disabled. A 1.45% employee/employer payroll tax funds the trust.

Insurance company spending
More than 20% of all healthcare insurance dollars spent go to admin overhead, advertising, extravagant executive pay, congressional lobbying, profit, and selecting 50 state insurance commissioners.

Public funds pay about 45 percent of the countries’ $3 trillion annual healthcare bill.
*UCLA Health Policy Research*

See next page for legislative framework

**A framework for creating a Federal Healthcare Insurance Agency (FHIA)**

1. **Congress** passes and the President signs a law creating a Federal Healthcare Insurance Agency (FHIA), an independent establishment of the executive branch of the U.S. The Agency Act would repeal Affordable Care, Medicare, and Veterans Affairs.

2. The President would appoint a Board of Trustees to be confirmed by the U.S. Senate. The new board would appoint a CEO.

3. A new Congressional oversight committee would oversee the Trust Fund budget and operations.

4. All existing Federal government healthcare agencies would be transferred to the new FHIA. All VA assets would be sold to private operators.

5. A sufficient payroll income tax, split between employee and employer, replacing the current Medicare tax would be implemented. Self-employed persons would pay quarterly.

6. All local, state, and federal government agencies would be required to adjust budgets to account for the Agency’s healthcare.

7. Healthcare providers would supply application forms for obtaining required picture ID cards, which could include an embedded memory of the applicant’s medical history.

8. Healthcare providers would bill clients/customers/patient services to Agency regional centers via electronic terminals provided and serviced by the Agency.

9. Within thirty calendar days, all healthcare recipients would receive a paper invoice itemizing service and a block-print statement offering a reward for fraud disclosure.

10. Within ninety calendar days, all healthcare providers would be paid via wire transfer to a bank account.

11. All foreign national healthcare services would be re-billed to their home countries quarterly.

12. For those countries that don’t pay their bill, USAID and trade agreements would be attached and published on the internet.

13. Total foreign country-by-country bills would be published on the internet and the national media.

*Congress depends on The Congressional Research Service, The Congressional Budget Office, and The Government Accounting Office for nonpartisan cost, legal and scientific analysis. Collectively, these three agencies employ more than 4,000 lawyers, economists, reference librarians, and scientists. See fas.org/sgp CRS/misc/index.html*

**The U.S. Constitution’s preamble recognizes “... promote the general Welfare” also Amendment XIV, Section I says “... nor deny to any person within its jurisdiction the equal protection of the laws.”**

Support single-payer healthcare legislation: Call, email, or write your congressman. Find your congressman at whoismycongressman.com/search

Please contact **HealthCareNow@att.net**