THE TEN PRINCIPLES OF HEALTH CARE

- All citizens shall have <u>freedom of choice</u> in selecting physicians, hospitals, or health insurance coverages.
- 2. There shall be open disclosure of prices to the public at all times for all health related services and products.
- 3. Unitary pricing shall exist throughout all the health care marketplace.

(The lowest fee which is accepted by a hospital, physician, pharmacy or health insurance company as full payment for a given health service or health insurance product shall be the fee which is accepted as full payment for all patients and customers; while at the same time, all health care providers, pharmaceutical companies and insurance companies shall have the freedom to determine their competitive prices which are openly disclosed to the public.)

- 4. All health care insurance policies shall have a <u>deductible which</u> is 3% of the net <u>household income</u>, where net household income is determined by the taxable Federal income of the household.
- Premiums for all health insurance policies shall be determined by community-based ratings.
- 6. Health insurance coverage for pre-existing conditions shall be continuous, portable and guaranteed.
- 7 Insurance coverage for prescription medications shall include a deductible.

(This will allow the creation of a marketplace which is price-dependent and not insurance-dependent.)

- 8. All participants in the delivery of health care services and products shall disclose all conflicts of interest to those they serve.
- Access to health care services for those who are in need shall not be denied, for all participants in the delivery of health care must share equally in the responsibility and burden of caring for the needy.
- 10. Adequate payments shall be provided by State and Federal governments for health care services and products which are provided to patients covered by either Medicaid or Medicare.