



FIFTEEN PRINCIPLES FOR SUCCESSFUL HEALTH CARE REFORM

The Research Institute
of the
The Ethics & Religious Liberty Commission
Southern Baptist Convention

High-quality, professional health care is an essential component of a healthy life. Our commitment to the sanctity of human life and love for our neighbor compels us to help our nation find a way to provide for the health care needs of all our fellow citizens.

To succeed in fulfilling this moral conviction our nation must address two concerns—the high cost of health insurance and the provision of health care to those who are uninsured. Health care is often too expensive for the average person to pay for without insurance, yet health insurance premiums continue to escalate, making it more difficult for people to afford health insurance.

Health care must become more affordable, either through reform of the private health care system or by government intervention. History teaches us that government-run health care is not the preferred option. Governments that have taken over health care have experienced skyrocketing costs and have resorted to rationing health services in order to remain solvent. Government is incapable of reining in costs while assuring high quality service or of raising the amount of money it needs through taxes to maintain the highest health care standards.

Having rejected the idea of government-run health care, we believe the moral goal of affordable, high quality, universal health care can best be achieved through reform of the private health care system. The goal of this reform should be to reduce the cost of health care and health care insurance while maintaining the highest possible standard of health care for all, thus increasing the quality of health care for more and more Americans.

Greed among insurers and health care providers is not the reason for the high cost of health insurance. It has been demonstrated that the principal sources of high costs are the result of other factors, like the impact of predatory lawsuits on doctors, the lack of competition among health insurance providers, poor lifestyle choices, and the cost of medical care for the uninsured.

Reform can address these and other concerns only partially. People must still be able to sue inept doctors for their losses, but within reasonable parameters. Competition can lower costs, but not eliminate them altogether. Freedom to make

lifestyle choices must still be respected, but better decisions should be strongly encouraged. Some people will refuse to obtain health insurance regardless of the incentives to do so. The nation's entire health insurance system should not be adjusted in order to accommodate these people, but ways should be set up to incentivize them to obtain insurance. While a perfect system is not attainable, there is much room for improvement.

As policymakers grapple with the competing moral and fiscal components of health care, they must produce a proposal that satisfies the criteria for reform. Reform merely for the sake of change is not reform. Below we offer fifteen principles that must be engaged in any health care reform for it to achieve the desired result of affordable, high quality, universal health care.

1. **Sanctity of Life.** Health care must honor all human life, from “conception to natural death” (*The Baptist Faith and Message*). Every stage of life, every type of disability must be treated with utmost reverence for every life. Abortion must not be mandated in health insurance plans. Health insurance plans should be encouraged to severely limit, and ideally exclude, coverage of any abortion except to save the mother's physical life. Moreover, government regulation must not penalize insurance plans that do not cover abortion. Every treatment must meet a rigorous pro-life standard that refuses to value or respect one life more than another life. Covered treatments must not be denied by insurance companies due to unrelated issues in a person's medical history. The right of conscience of health care providers and pharmacists must be guaranteed.
2. **Tort Reform.** Unnecessary legal threats are burdening every level of health care. To protect themselves from lawsuits doctors order unnecessary tests for patients and pay exorbitant liability insurance premiums. Reasonable limits on punitive damage monetary awards and legal fees must be set. Doctors must be assured they cannot be held liable for failing to order tests for which no reasonable evidence of need is apparent. Laws should be enacted to discourage frivolous lawsuits.
3. **Competition.** The health care industry must be competitive. A single-payer, government-run health care system will not be able to control costs without significantly reducing services. The surest way to control costs and to improve service and efficiency is to allow for a free-market approach that rewards those who offer the best product at the best price and frees companies to reward healthy lifestyle choices with substantially lower costs.
4. **Accountability.** There should be a movement to encourage wellness and prevention. Responsible behavior should be incentivized. Healthy lifestyle choices should be rewarded with lower insurance premiums, and certain unhealthy choices should result in higher insurance premiums. People must still be free to make unhealthy lifestyle choices, but the cost of their health insurance should reflect accountability for those choices. Doctors should also be held accountable with appropriate disciplinary repercussions for negligence.

5. **Accessibility.** Everyone should be able to obtain some minimal, acceptable level of health insurance, and they ought to obtain it. Catastrophic medical care coverage should be available to all people. To increase accessibility, more health care practitioners must be trained and more health care points of access must be available.
6. **Private Providers.** Health care must remain in the hands of individuals, private providers, and insurers. Experience in other countries shows that tax-supported or government-sponsored health care crowds out all other participants and eventually will lead to the loss of the competitive market so crucial to keeping costs down and quality up. It is appropriate for government to pay for certain services, but a robust private health care system is essential.
7. **Careful Government Regulation.** The government can play a crucial role in health care by assuring that health care plans are administered appropriately and with integrity. The consumer needs the oversight of a regulating body that can ensure the companies providing health care are acting lawfully. However, no government regulations should interfere with the doctor-patient relationship. Physicians in consultation with their patients, not government bureaucrats, should be making decisions about the treatments provided to patients.
8. **Encouraging Innovation.** Innovation must be encouraged in the health care industry. Health savings accounts, cash clinics, privately run co-ops, risk pools, interstate health plans, subsidized private and faith-based community clinics, and many other innovative ideas should be part of an ever-adjusting response to the constantly changing health care environment.
9. **Affordability.** People and businesses must be able to afford their health care insurance. Those in low income brackets must have subsidies in order to help them afford coverage on a sliding fee scale.
10. **Transparency.** Consumers must be able to understand with ease what health care plans cover and what they don't cover. Failure to disclose unrelated health issues must not be a factor in denial of health care coverage. Hospitals must disclose the costs of items or services patients for which patients will be required to pay.
11. **Portability.** The loss of a job should not also expose a person to the loss of his health insurance. Insurance coverage must continue for people until they can obtain alternative coverage.
12. **Protection from Discrimination.** Disability should not be a cause for rejection or loss of insurance. Pre-existing conditions must be treated realistically, not a cause for denial of coverage. No discrimination should be allowed on the basis of age.

13. **Research and Development.** Advancements in medicine are in the best interest of all people. Research and development of new drugs and procedures must be encouraged and then introduced into the health care system as soon as medically appropriate. America leads the world in the development of new medicines, treatments, and medical devices because American companies are allowed a reasonable profit on massive investments in the field of medical research. If they are denied the possibility of a reasonable profit on their massive outlays of investment capital, they will not engage in such activity.
14. **Reduce Waste and Fraud.** Waste and fraud are significant cost factors in health care. Appropriate measures should be taken to eliminate waste and to hold accountable those who engage in fraud. Health insurance companies must find ways to reduce high administrative costs, such as unnecessary pre-authorization requirements.
15. **Catastrophic Medical Coverage.** The government should underwrite the costs for catastrophic health care when needed. One of the unavoidable by-products of the miracles of modern medicine is that diseases and maladies that until recently resulted in death can now be cured. However, the costs can often be prohibitive, even for people with health insurance. Even with all the safeguards possible, catastrophic costs will still occur at times. In such cases, there should be a financial threshold, at which point the government would assume the catastrophic costs for such health care in order to protect individuals or families from facing financial ruin and bankruptcy as a result of the costs of certain medical treatments.