

Improving Health and Health Care: Values and Principles for Transformation

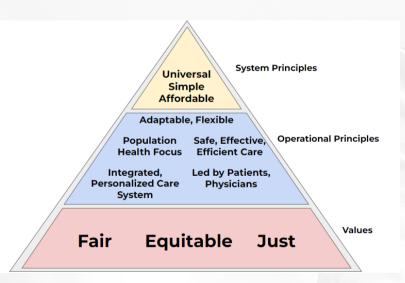
Health care in the United States is not fair

It's not just. It's not equal. It violates our country's founding principles. Access to quality care varies based on income, wealth, employment, geography, race, ideas of who is 'deserving' and who is not. Care is too often fragmented, commodified, depersonalized. Its systems are mind-bogglingly complex for both patients and clinicians. It is too often designed to maximize profit, not to meet patient needs. Public policy decisions are dominated by wealthy corporations and trade associations focused on narrow self-interest.

Fixing this deeply flawed system needs the sustained commitment of socially conscious American physicians, driven by our values to reshape the world we live and work in.

Our goal is Health - for each of us and for all of us, for individuals and for communities.

Our foundational social values are fairness, equity and justice.



Our system principles: make American health care Universal, Simple, and Affordable (USA).

Universal – Health care is a basic human right - every person deserves access to high-quality health care.

Simple – Our system is unnecessarily complex for patients and for those who care for them. Built on a foundation of trustworthy relationships, it should be simple to understand, accessible, easily navigable, user friendly, transparent, and barrier free. Administrative paperwork should be minimized, and patients should be able to understand their bills. Records should be patient centered, not provider centered. They should facilitate collaborative communication between patients and clinicians, and across care settings.



Affordable – We can reduce costs to individuals and society by charging fair prices, dramatically reducing administrative costs, simplifying system navigation, building sustainable primary care systems, and creating transparency of financial arrangements. The excessive price of U.S. health care drains resources from other priorities that are critical to promoting health and reducing illness, such as housing, education, and nutrition.

Our operating principles: to achieve Universal, Simple, Affordable Health Care we must overhaul the *systems* for the financing and delivery of care. These principles are essential to achieve that aim:

Integrated, Personalized Care System - Primary care is the foundation of a high functioning health care system. Robust integrated health teams are essential. We endorse the recommendations of the National Academies consensus report "Implementing High-Quality Primary Care," which recognized primary care as a public good. The relatively modest resources needed to build these systems must be provided, as well as an ongoing reimbursement system that ensures its success.

Public Health Focus – Like primary care, public health has too long been neglected. Much illness in the United States is caused by social and economic factors. We must fundamentally re-align and integrate our investments in public health, primary care, and the social causes of ill-health to more effectively meet the needs of communities, with special attention to historically marginalized groups.



Safe, Effective, Efficient Care – We must build systems that are safe, reliable, effective, and fiscally responsible. Continuous improvement at every level of care is expected. Evidence-based practices, coupled with a robust research infrastructure are essential. We must not only understand what's effective, but what it takes to reliably and equitably implement it. Transparency of clinical results and safety practices is essential. Tort reform is possible – when harm occurs, there should be fair compensation and a commitment to remedy system failures.

Leadership – Large health systems, politicians, professional guilds, insurers, government, and entrepreneurs have dominated the creation of our current dysfunctional health care system. The voices of individual patients and physicians have too often been marginalized. Physicians and other caregivers, and people who receive care, must play a larger role in designing health care systems that are patient-centered.

Adaptability – Our systems must continuously evolve in response to advances in scientific knowledge, technology, therapeutics, and delivery design. Adaptability requires systems that are flexible enough to reliably deliver care to diverse geographic and cultural communities: urban, suburban, rural, tribal nations. As we've learned with Covid and extreme weather events, we need to be nimble in response to crisis situations.

