

This model (a compromise) attempts to leverage our current public sector + private sector medical infrastructure and funding mechanisms. It will require that both our private and government institutions cooperate in common sense fashion to meet these 4 primary goals by year 2015:

- (1) provide basic human health care to all citizens
- (2) remove health care burden to small businesses
- (3) streamline existing delivery + payment systems
- (4) eliminate fragmented and wasteful systems

**Legend**

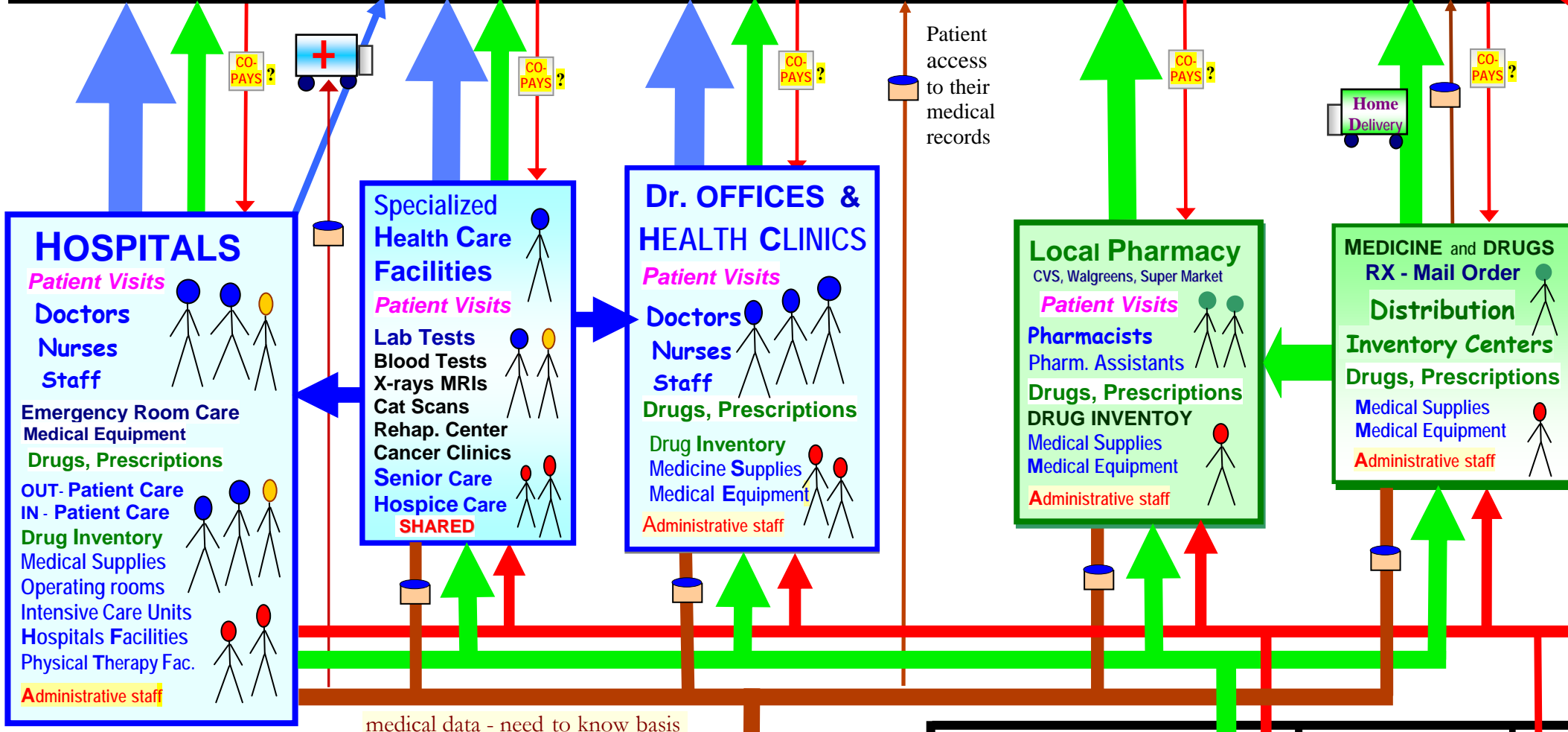
- Flow of HEALTH CARE (Blue arrow)
- Flow of Medicine Drugs (Green arrow)
- Flow of Std information (Brown arrow)
- Flow of PYMT for Service (Red arrow)
- Flow of Billing information (Black arrow)

**PATIENTS**

HEALTH CARE SERVICES

HEALTH CARE COSTS

- Health Insurance
- Prescription Drugs
- Co-payment Fees
- Medical Services
- Medical Supplies
- Avoid Health Care?



**PATIENT CARE SYSTEMS**

- Protected Secured Data
- LOCAL or Centralized
- EMR Electronic Medical Records
- Patient Billing SYSTEMS

**BIG PHARMA DRUG / Generic Manufactures / Bio-Technology / Med Equip. Co**

- Research & Dev. COSTS X%**
  - Research & /Develop Costs
  - Drug Testing + FDA approval
  - Legal Liability Costs
- Manufacturing COSTS X%**
  - Direct Material Costs
  - Manuf. Process Costs
  - Payroll Costs
- Marketing COSTS XX%**
  - TV Advertising
  - Other Media Advertising
  - Sales Reps + samples
- Distribution COSTS X%**
  - Order + Shipping Costs
  - Delivery process
  - Warehousing Costs

**Implement Reforms + Streamline**

- DELIVERY SYSTEMS**
  - Volume Drug Purchases
  - Encourage Preventive Medicine
  - Encourage Patient Responsibility
  - Eliminate Pre-Condition Screening
  - Track Good and Bad HC Providers
  - Adopt Best Medical Practices
  - Reduce Unnecessary Tests
  - Greater use of Medical Students
  - Nurses Volunteers Civil service
- PAYMENT SYSTEMS**
  - Greatly Reduced Paper Shuffle
  - Standardize "IT" info sharing
  - Standard Protected EMR Data
  - Criminal penalties if data misused
  - Reduce Big PHARMA control
  - Reduce Mal-Practice insurance
  - Caps on Mal-Practice claims
  - Tighter controls on HC Costs
  - Prosecute FRAUD bogus claims

- \*Description Health Care Costs**
- 1) Doctors Nurses Staff
  - 2) Equipment & Facilities Costs
  - 3) Admin Staff - Billing, A/R, A/P, G/L
  - 4) Liability Insurance
  - 5) Medical Legal Claims
  - 6) Other Costs

Our government and the free enterprise system should provide financial support to medical students (doctors, nurses, paramedical personnel) to help offset extraordinary medical training and education costs. Medical Students SHOULD NOT come out of school owing \$ 100,000+