

United States Senator Ron Wyden



July 12, 2008

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The Healthy Americans Act

Portable, affordable, high quality private health care guaranteed for all Americans

Senator Ron Wyden has unveiled a groundbreaking, bipartisan proposal to provide affordable, high quality, private health coverage for every American, regardless of where they work or live. It is the first bipartisan proposal to reform health care in over a dozen years.

The plan, known as the Healthy Americans Act, would:

- guarantee private health care coverage for all Americans;
- provide health benefits equal to those that Members of Congress now enjoy;
- provide incentives for individuals and insurers to focus on prevention, wellness and disease management;
- establish tough cost containment measures that save \$1.48 trillion over 10 years; and
- be fully paid for with the \$2.2 trillion currently spent on health care in America today.

Under the Healthy Americans Act, health coverage would be portable. Individuals could keep the coverage they have as they move from job to job. Insurance would also no longer be tied to employment. If an individual is laid off, leaves their job voluntarily, or develops a serious illness, he or she would continue to be covered.

All employers, along with individuals and the government, will share the responsibility of financing health care. During a two-year transition period, employers who provide employee health benefits would be required to convert their workers' health care premiums into higher wages. Employers who don't currently offer health benefits would have to make phased-in "Employer Shared Responsibility Payments," which would be used to provide financial assistance to individuals and families of modest income. After two years, all employers would make "Employer Shared Responsibility Payments." These payments would reflect the relative ability of small and large employers and low- and high-wage industries to make such payments, and would have no direct impact on the coverage that is available to their employees.

Employees, in turn, would be required to purchase private health coverage with their higher wages. To ensure that it's affordable, the plan

More Information

- [Overview](#)
- How the Healthy Americans Act helps:
 - [Employers](#)
 - [Employees](#)
- [Read](#) the Lewin Group's "Cost and Coverage Estimates of the Healthy Americans Act"
- [Read](#) the full text of the Healthy Americans Act
- [Read](#) the Congressional Budget Office and Joint Committee on Taxation's independent analysis of the Healthy Americans Act
- [Read](#) a section by section explanation of the act

Recent Press Releases

[Cantwell Co-Sponsors Healthy Americans Act 07/07/08](#)

[Speech: Wyden Addresses OHSU Graduates at 2008 Commencement 06/03/08](#)

[Wyden Addresses OHSU Graduates at 2008 Commencement 06/03/08](#)

[CBO and Joint Tax Find Healthy Americans Act Would Lead to Surpluses after 2014 05/01/08](#)



Upcoming Events

- Oregon Open House
July 15, 2008
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would fully subsidize the premiums for those who live below the poverty line. Those people between 100 percent and 400 percent of the federal poverty line would also receive subsidies on a sliding scale to help pay their premiums.

Individuals would choose from a variety of private plans offered in their state. State-based Health Help Agencies (HHAs) would guide individuals through the enrollment process. These agencies would also provide consumers with unbiased information about competing private health plans and determine premium reductions that will ensure every American can afford their health plan. HHAs would ultimately lower administrative costs by coordinating payments from employers, individuals and the government.

As for the insurance companies, they would no longer be allowed to "cherry pick" their customers. Under the current system, insurance companies can pick and choose which customers they sign up -- typically the healthy ones -- and send those in fragile health to government programs more fragile than they are. The Healthy Americans Act stipulates that insurance companies be required to cover every individual who chooses to enroll and that they be prohibited from raising prices or denying coverage if individuals are sick or are at risk of becoming sick. Previous and existing health problems, occupation, genetic information, gender and age could no longer be used to determine eligibility or the price paid for insurance.

The government, for its part, would make sure that every American has, and can afford, health insurance. Every time an individual interacts with local, state or federal government, they could be required to verify their enrollment in a private health insurance plan.

The Healthy Americans Act focuses on preventive care and provides insurance companies with an incentive to keep their subscribers healthy. Individuals would not be charged co-pays for preventive services or chronic disease management. Insurers would be able to offer discounts and other incentives based on participation in wellness programs, like nutrition counseling, tobacco cessation and exercise. Primary care physicians would be reimbursed for investing time in chronic disease management and prevention. And with HHAs publishing consumer-oriented information on every plan's success in prevention and disease management, insurance companies would ultimately be competing to keep Americans healthy.

Health care costs in the United States are growing at an unsustainable rate. In 2006, Americans spent more than \$2.2 trillion on health care. Under the Healthy Americans Act, the average annual rate of growth in health spending would slow by 0.86 percent between 2007 and 2016, resulting in savings of \$1.48 trillion.

[Senators Expand Employer and Employee Choices for Affordable, Universal Coverage Under the Healthy Americans Act](#)

04/24/08

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