NCMS GUIDING PRINCIPLES FOR NATIONAL HEALTH SYSTEM REFORM

Adopted by NCMS Board of Directors 5/17/09

Access and Workforce

- Promote portable and continuous health care coverage for all Americans using an affordable mix of public and private payer systems.
- Invest needed resources to expand the physician-led workforce to meet the health care needs of a growing and increasingly diverse and aging population.
- Recognize and support the role of safety net and public health systems in delivering essential health care services within our communities to include essential prevention and health promotion/public health services.
- Support the development of a well-funded, nationwide emergency and trauma care system that provides appropriate emergency and trauma care for all Americans.

Quality and Safety

- Promote patient safety as a priority for reform, recognizing an effective mix of initiatives that combine evidence-based accountability standards, committed financial resources and rewards for performance that encourage and ensure patient safety.
- Adopt physician-developed, evidence-based tools for use in scientifically valid quality/patient safety initiatives that encourage and reward the physician-led health care delivery team and include clinical comparative effectiveness research used only to help choose the best care for patients.
- Provide financial and technological support to implement physician-led, patient-centered medical homes and improved care coordination for all Americans.
- Incorporate physician-developed, evidence-based measures and preventive health and wellness initiatives into any new or expanded health benefit package as a means to promote a healthier citizenry.
• Support the implementation of an interoperable National Electronic Medical Records System, financed and implemented through federal funding, to ensure real-time data at the point of care to improve quality.

**Patient Education and Informed Choice**

• Preserve the integrity of the patient-physician relationship, and encourage patient and physician choice.
• Support public policy that fosters individual responsibility for one’s health, and encourage maintaining a healthy lifestyle.
• Support policies that encourage patient participation and accountability in appropriate utilization of system resources.
• Support public policy that fosters ethical and effective end-of-life care decisions.

**Financing and Cost Management**

• Provide sustainable financing mechanisms that ensure an affordable mix of services and create responsibility among all stakeholders for financing and appropriate utilization of the system.
• Require accountability and transparency among health insurers to disclose how their premium dollars are spent, eliminate pre-existing condition exclusions, simplify administrative processes, and observe fair and competitive market practices.
• Reform the tort system to prevent non-meritorious lawsuits.
• Abolish the Medicare SGR annual update system and initiate a true cost of practice methodology that provides for annual updates in the Medicare Fee Schedule as determined by a credible, practice expense-based medical economic index.
• Require payers to have a standard, transparent contract with providers that cannot be sold or leased for any other payer purposes without the express, written consent of the contracted physician.
• Support efforts to make health care financing and delivery decision-making more of a professionally advised function, with appropriate standard setting, payment policy and delivery system decisions fashioned by physician-led deliberative bodies as authorized legislatively.