



HEALTHCARE



District 7 County Commissioner

Xavier L. Suarez

2018

Introduction:

One in ten Florida residents, or about two million Floridians, don't have health insurance.

Between Andrew Gillum and Ron DeSantis, the one proposing a universal health care plan was Andrew Gillum. His plan to solve what his party (in the main) perceives as a universal right to health care consists of the following elements:

1. Expansion of Medicaid coverage to any and all uninsured. Assuming typical Medicaid capitation of \$4,000 per year that is an \$8 billion per year expenditure – or roughly ten percent of the entire state budget.
2. Increase the state corporate tax by 40% from its current rate of 5.5%. Florida's budget predicts revenues from this tax will be close to \$2.45 billion for FY 2018-19. Increasing this value by 40% would bring it to \$3.43 billion. This increase to a rate of 7.7% does not come close to fulfilling the intended promise of universal health care.

And so, the question remains: How does Florida, the third most populous state, provide universal access to health care for all? One way to attack this question is to separate the components of health care into the four basic divisions used by CMS, which is the agency that doles out the bulk of the funds needed for Medicare¹ and Medicaid: Hospital Coverage, Medical Coverage, Medicare Advantage, and Prescription Drug Coverage.

Because Part C combines Part A and Part B, and deals mostly with managed care, we can simply consolidate the above categories into three segments, roughly as follows: Hospitalization, Primary and Specialist Care and Prescription Drugs.

The articles included in our anthology tackle those three segments of the health care economy of the nation and of Florida, quantifying them in ways that assumes that Florida is typical of the national health care industry.

Part A (Hospitalization)

The first document is taken from my book, *The Wealth of a Nation*. It identifies the way in which our main public hospital and our largest private hospital chain are subsidized by the government. In effect, the hospital part of every healthcare is pretty much under control, since it is in the American psyche that people are not turned away from needed hospitalization based on ability to pay. That notion has big gaps, of course, and we hear about it from the JMH administrators every year; in fact, the county provides subsidy for public health in the amount of close to \$500 million per year. The good news is that the county's public health component has now expanded to the four corners of the county.

That brings us to the second document, which is from JMH and illustrates its decentralized provision of urgent care, critical care, primary care and specialist care for all those who seek public health.

Part B (Primary and Specialist care)

The county provides health care insurance to approximately 25,000 of its employees. The average age of the employees so insured is 47. The cost per employee for that demographic is about \$14,000 per year. By

¹ Medicare is health insurance for people 65 and older, people under 65 with certain disabilities, and people of any age with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant)

comparison, the school board pays \$9,000 per year, which is almost 30% less. It is not clear to us if that is because they are younger or engaged in less hazardous employment, or because the school board plan is less generous.²

In a county the size of Miami-Dade, if you assume 10% of the resident population are uninsured, and 90% of those are not wealthy, that would mean about a quarter million people having to pay what is called fee-for-service for non-emergency health care.

If you then assume that the average demographic is halfway between the Medicaid capitation of \$4,000 per year and the Medicare capitation of \$14,000 per year; that would mean approximately \$2.5 billion per year in needed governmental subsidies.

Statewide, assuming similar demographics, that is about \$20 billion per year.

There are various ways to bring that figure down. One (similar to what Commissioner Suarez is considering for county employees) is to require the use of county facilities, this would require a substantial increase in the capacity of those facilities, or their operating hours, or both.

Another is to eliminate the cost of "defensive medicine" by changing the law to provide immunity similar to what is provided to government facilities.

Another is to emphasize and reward healthier habits and preventive medicine, as is being done in places like Massachusetts,

And then, there is the Gillum plan, mentioned above.

That brings us to Prescription Drugs.

Part D (Prescription Drugs)

There is clearly over-usage of medications, misuse of medications, and issues of over-priced medications.

Exhibit 3 compares the lower cost of Canadian prescription drugs, as compared to those sold in the U.S. By almost any measure, the United States pays somewhere between 30% and 50% more for prescription drugs than other industrialized nations. Patent issues and over-regulation by the FDA are factors at play.

Prescription drugs constituted 29% of the cost of healthcare in the United States in 2015. Reducing their cost by even 50% does not get us to the Promised Land of efficient, affordable, universal health care.

But it is not insignificant.

² By coincidence, Commissioner Suarez is insured under the county's plan and his wife is insured under the school board's plan. It would seem, at first blush, that the county's plan deserves the often-mentioned epithet of being the Mercedes-Benz of insurance plans. Not by coincidence, Commissioner Suarez is reviewing the costs of the plan to determine what elements of it are susceptible to cost-cutting, without reducing quality of coverage. The single most obvious way is to require that all county employees and their dependents use county-owned facilities for their urgent and emergency care, as well as county subsidized clinics for primary and specialist care.

Excerpt from *The Wealth of a Nation* by Xavier L. Suarez

Health Care in the Twenty-First Century

Health care is a three-headed animal in the United States; it is composed of businesses, government and charitable entities that provide some form of medical care to Americans. The fact that it is composed of profit-making businesses, government and non-profits makes it unique; the closest thing to that mix would be education, since close to 90% of elementary school kids in America attending public schools. Throw in higher education, with many private, profit and not-for-profit colleges, and you have the kind of mixed government, private for-profit and private non-profit that we see in the health care industry.

Health care is a much bigger sector in the economy. It is a behemoth, and reflects the extraordinary advances made by medicine, coupled with the never-ending desire of modern society to lengthen life to its fullest extent.

Let us illustrate the rather eclectic mix by offering the examples of two hospitals in Miami – one public and one private.

The public hospital that serves the Miami metropolis is called Jackson Memorial. It is state of the art in its diagnostic equipment and is even among the leaders in the nation in some specialties, such as reconstructive surgery (through the Ryder Trauma Center) and neonatal surgery.

As I write these lines, the big public policy question is to what extent the government (by use of bond financing) should subsidize enormous capital improvements that are needed in order for Jackson Memorial Hospital to “compete” with the private hospitals for patients. The idea that a public hospital needs to compete with private hospitals is itself disturbing to purists who prefer that a public entity stick to providing health care services only to the indigent.

However, as the *Miami Herald* in its rather incisive coverage explains, the line between private and public, as far as hospital services, is not that clear. Let’s elaborate, using the *Herald* figures, which show that in today’s economy, all hospitals are hybrids performing public and private functions.

Jackson Memorial provides most of the walk-in indigent care, as well as emergency care for those uninsured who have acute care needs and find themselves reasonably close to the public hospital’s emergency rooms, located in three facilities – one central, one South and one North. Only about 14% of its patients have commercial health insurance coverage. Almost two-thirds of the patients are covered by either Medicare (21%), which insures all Americans over 65 years old, or Medicaid (40%), which insures the poor.

Other indigents who use the public hospital and are not covered by either private or government insurance are either reimbursed by the state or indirectly subsidized by the county, which provides \$250 million

each year in financial support, and the paying patients, who absorb higher costs to cover those who cannot pay.

Baptist Hospital is a premier, private, for-profit enterprise. Only 18% of its patients are poor (covered by Medicaid) and a mere 5% have no insurance – though some of those are foreigners who pay for their medical care from their own funds. So far it looks like a totally different clientele from Jackson Memorial; however, when you count in the estimated 43% covered by Medicare, it can be seen that Baptist, like Jackson, is essentially a public hospital, since 61% of all its patients are covered by government insurance.

More correctly, Baptist Hospital is a hybrid, which happens to be owned by private investors and has no particular obligation to serve those who cannot pay – unless they are in a dire emergency, in which case there is an obligation to stabilize the patient before transferring him or her to the nearest public facility.

Hospital services are what are called “Part A” under Medicare and Medicaid, which as stated above are the two principal components of government subsidies in the health care industry. Outpatient services, such as primary care physicians and specialists, fall under “Part B” of Medicare/Medicaid. “Part D” includes drugs and other medications, and “Part C” covers ancillary medical services such as vision, hearing, and dental care.

Let’s see how the various parts of the industry consume both private and public resources to the tune of 2.7 trillion dollars. In the process, we shall see how this enormous pie is divvied up by doctors, nurses, technicians, drug companies and other industry components, with a view to determining how efficient this enormous industry is (or is not).

September 20, 2018

We currently have 3 major hospitals and the one in Doral coming in 2020, six urgent care facilities (Country Walk, Keystone Point, Cutler Bay, North Dade, Doral and Coral Gables – coming in 2020.) We offer primary care and specialty services at Jackson Memorial, Jackson South and Jackson North. We also have four primary care clinics with specialty care; Jefferson Reeves, Rosalie Wesley, Penalver and Prevention, Education & Treatment Center. Let me know if you need anything further.



Esther Caravia-Abolila
Chief of Staff to Carlos A. Migoya
President and CEO

Jackson Health System

Executive Office
1611 N.W. 12th Avenue
Miami, Florida 33136
Office: 305-585-6754



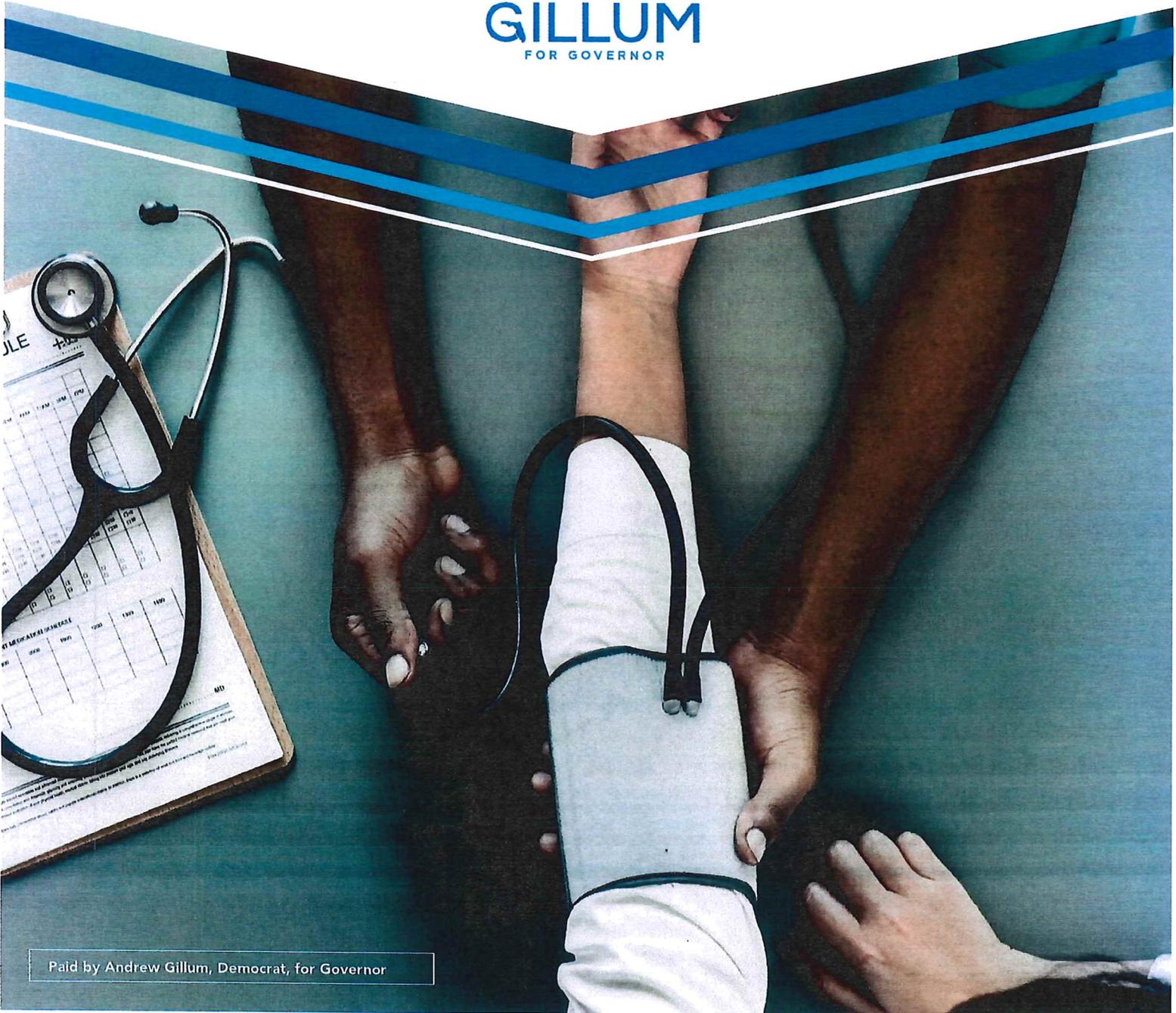
Exhibit 3

DRUG PRICES CANADA VS USA		
EPIPEN FOR ANAPHYLAXIS	\$290	\$620
CRESTOR FOR HIGH CHOLESTEROL	\$160	\$730
PREMARIN FOR ESTROGEN THERAPY	\$84	\$421
ABILIFY FOR DEPRESSION	\$436	\$2,626
ZETIA FOR HIGH CHOLESTEROL	\$183	\$840
NEXIUM FOR HEARTBURN	\$214	\$736
SYNTHROID FOR HYPOTHYROIDISM	\$50	\$101
JANUVIA FOR DIABETES	\$255	\$1,064
CELEBREX FOR ARTHRITIS	\$212	\$895
ADVAIR FOR ASTHMA & COPD	\$212	\$980

SEN. BERNIE SANDERS

PRESCRIPTION FOR A **HEALTHY FLORIDA**

ANDREW
GILLUM
FOR GOVERNOR



Paid by Andrew Gillum, Democrat, for Governor

SUMMARY

Mayor Andrew Gillum believes that healthcare is a right, not a privilege — and that everyone should have access to affordable, quality healthcare when they need it. No one in Florida should be one illness away from bankruptcy — and yet for many families, the most frightening part of getting sick is figuring out how to pay for it. That's especially true for up to eight million Floridians with pre-existing conditions; the over five million Floridians above age 60; the 1.7 million Floridians covered by the Affordable Care Act; the 800,000 Floridians eligible for coverage under Medicaid Expansion; the 49,000 veterans without health insurance; and the 7.6 percent of children lacking health insurance.

That's why Mayor Gillum has proposed some of the nation's strongest state-based healthcare protections and policies including:

- A constitutional amendment declaring a right to healthcare
- Strong legislation to protect Floridians with pre-existing conditions
- Expanding Medicaid to cover 800,000 Floridians
- Defending women's reproductive health and no-cost contraception
- Legalizing smokable medical cannabis and fully implementing Amendment 2
- Reducing prescription drug prices
- Establishing a statewide mental health commission
- Ensuring all children have access to CHIP and children's health coverage
- Championing Medicare For All

Meanwhile, Ron DeSantis would be a disaster for Florida's healthcare. In Congress, DeSantis voted more than a dozen times to eliminate protections for people with pre-existing conditions, like cancer, asthma, and even maternity and newborn care; voted to cut guaranteed benefits for Medicare and slashed \$350 billion from the program; and opposed expanding Medicaid to cover 800,000 working Floridians. And DeSantis' plan for those whose coverage he'd eliminate? Just "show up to the emergency room." The DeSantisCare prescription will make Floridians sicker and poorer.

ENSURING A CONSTITUTIONAL RIGHT TO HEALTHCARE

Because access to affordable healthcare is a right, not a privilege, our state's Constitution should align with this moral imperative. That's why as governor, Mayor Gillum will push for a constitutional amendment ensuring that access to basic affordable healthcare is a fundamental right of all Floridians.

The amendment would go before Florida's voters statewide. It would add a new section to Article I of the Florida Constitution and would direct the Florida Legislature, in weighing priorities and allocating available resources, to afford the highest consideration to securing Floridians' right to affordable healthcare.

Gillum also filed this proposed amendment with the Constitution Revision Commission.

PROTECTING FLORIDIANS WITH PRE-EXISTING CONDITIONS

Between three and eight million Floridians — that's up to one in three — have a pre-existing health condition. Everyone knows someone with a pre-existing condition, or has one themselves.

Before the Affordable Care Act, our families and neighbors struggled to get health insurance without required coverage for pre-existing conditions — something Ron DeSantis voted in Congress to eliminate more than a dozen times. Even if coverage could be found, insurance companies could charge more to those with pre-existing conditions — and even charge women more than men for the same coverage.

That's why in his first legislative session, Mayor Gillum will sign a bold, progressive bill — the first of its kind in the South — in which insurers would be prohibited from:

- Denying coverage or benefits for any pre-existing conditions
- Charging higher premiums on the basis of pre-existing conditions
- Using gender ratings to charge women more than men

This will give Florida the strongest state protections in the nation for people with pre-existing conditions. As a state, we can't afford to go back to the days when people were denied coverage or forced to pay more because of a pre-existing condition — or because they're a woman.

EXPANDING MEDICAID FOR 800,000 FLORIDIANS

Nearly half of Florida's working families struggle to make ends meet — and for many, lack of access to affordable healthcare makes it worse. That's why as governor, one of Mayor Gillum's first priorities will be expanding Medicaid to cover over 800,000 Floridians, made possible through the Affordable Care Act.

For nearly a decade, Republicans have denied healthcare to Florida's most vulnerable populations by refusing to act. More than half of individuals who would be covered by Medicaid Expansion are the working poor, while others are people with disabilities, students, and non-working spouses.

Expanding Medicaid would have a major positive impact on Floridians. It would improve children's performance in school, create nearly 122,000 good jobs, reduce uncompensated care in our hospitals, increased access to long-term care for seniors and the disabled, and help provide healthcare for our 49,000 uninsured veterans. While the ACA has already reduced the number of uninsured veterans by 5 percent, estimates suggest Medicaid expansion could insure another 2 to 4 percent of Floridians who served our country.

Floridians are already paying for Medicaid expansion through federal taxes without receiving these benefits. Meanwhile, Florida ranks third highest in the nation for uninsured residents. The expensive cost of providing uninsured care in emergency settings is eventually shared by all of us. We all bear this higher cost through increased premiums, co-payments, and other healthcare expenses, which could be avoided by expanding Medicaid.

The time is now to join the 32 other states that have expanded Medicaid.



DEFENDING WOMEN'S REPRODUCTIVE HEALTH AND NO-COST CONTRACEPTION

Women's reproductive health and choices must now, and always, belong to women.

Mayor Gillum will always defend women's reproductive rights from radical politicians who would interfere in personal medical decisions with anti-choice politics.

As governor, Gillum will veto anti-choice legislation that would jeopardize the reproductive health of women.

In 2017, the Trump administration rolled back no-cost access to contraception established by federal law in 2010, and allowed employers to opt-out of coverage with little to no oversight. This short-sighted action has allowed a woman's employer to stand between her and her doctor in determining what kind of healthcare she may or may not need. Contraception is a critical part of women's health — including managing debilitating symptoms and treating disease.

As governor, Gillum will sign legislation to defend no-cost access to contraception that protects women's health. Many states, including Texas, West Virginia, Georgia, and Arkansas, have already passed legislation or otherwise required insurers to cover contraception at no cost to women. This is too important a decision to be left to the federal government or employers.

Under the Gillum administration:

- All health policies that cover prescriptions must provide coverage for any FDA-approved prescription contraceptive drug or device.
- Insurers would be prohibited from imposing a co-pay, co-insurance, fees, or other costs for contraception.
- Qualified religious organizations (such as religious hospitals and universities) could request an exemption consistent with current federal law under the ACA.
- Employers would be required to notify their employees that they refuse to provide coverage for contraception.
- Mirroring the Obama administration's exemption rule, women covered by policies provided by institutions seeking exemptions would still have no-cost access to birth control, directly through their insurer.

LEGALIZING SMOKABLE MEDICAL CANNABIS

The people of Florida spoke clearly when approving medical cannabis with 71 percent of the vote, providing hope to those with chronic pain, degenerative diseases, disabilities, and terminal conditions. But despite this overwhelming support, the Florida Legislature restricted the ability of patients to utilize smokable medical cannabis. And when courts found the restriction unconstitutional, Rick Scott wrongfully appealed the decision — something even Republicans have derided as “neither compassionate nor conservative” and “a waste of taxpayers’ money.”

As governor, Mayor Gillum will immediately end the appeal and fully allow the will of Floridians who voted for Amendment 2 to be implemented.

ADDRESSING OUR MENTAL HEALTH CHALLENGES

More than 800,000 Floridians live with serious mental illness — yet 70 percent of those who need mental health treatment cannot get it, according to the Orlando Sentinel. That’s in part because Florida ranks 49th among states for mental health funding, with Mississippi spending four times more per resident than Florida.

Mental health challenges touch every neighborhood in every corner of our state, and it’s time we address it as the important statewide public health challenge that it is. As governor, Mayor Gillum will sign legislation establishing a statewide mental health commission to develop evidence-based approaches to care, and will increase funding to train law enforcement entities who respond to mental health issues.

These are bipartisan solutions that were introduced by a Republican House member — and they’re the kind of common-sense proposals every Florida lawmaker should support.

REDUCING PRESCRIPTION DRUG PRICES

The cost of prescription drugs has skyrocketed for Floridians. Between 1984 and 2016, spending on prescription drugs in the U.S. increased by 728 percent. Many Floridians struggle to afford their life-saving medications, with some even rationing or skipping doses of drugs they need, just to make ends meet.

Mayor Gillum believes we cannot simply stand by as Floridians make tough decisions between which medications to fill and putting food on the table. As governor, Gillum will support multiple solutions to bring down the price Floridians pay for necessary medicines and treatments.

- As governor, Gillum will expand on the anti-gag rule legislation recently passed by the Florida Legislature by signing a bill prohibiting a patient from ever spending more on their drug copayment than the cash price for the same drug. Requiring patients to ask their pharmacist if they can pay less for prescriptions unfairly puts the burden on Floridians to further navigate an already confusing healthcare system.
- Gillum will sign legislation filed in 25 states that would require drugmakers to report a reason for raising the cost of any drug by more than 10 percent. Prescription drug companies owe their patients an explanation when making their life-saving medications less affordable.
- Several states have formed compacts to buy prescription drugs in bulk in order to reduce prices — but Florida is not a member of any. As governor, Gillum would direct the Agency for Health Care Administration to explore ways Florida can join with other states to increase the state's purchasing power and reduce the price the state pays for prescription drugs.

WORKING TO END FLORIDA'S OPIOID AND ADDICTION EPIDEMICS

The opioid epidemic continues to claim thousands of lives in Florida. This tragedy has not only been devastating to the Floridians and families ruined by addiction, but has also been an enormous challenge for the healthcare industry and first responders. With the crisis only getting worse, our next governor must do more to heal the pain and prevent tragedy before it happens.

Years of criminalizing addiction has only made our state's challenges around the opioid more difficult. Mayor Gillum believes we need to treat addiction as a disease and approach it with compassionate, evidence-based solutions.

Gillum will support additional funding for all first responder agencies in Florida to be equipped with life-saving overdose drugs, like naloxone. He will also support liability legislation that holds harmless those administering anti-overdose drugs in good faith. Some law enforcement agencies have expressed hesitation to administer these drugs due to liability concerns; this legislation will eliminate those first responders' concerns.

Further, Gillum will undo Rick Scott's cuts to substance abuse programs in the Department of Corrections, programs that help inmates reintegrating into society avoid falling victim to addiction. As governor, Andrew Gillum will work to expand on these programs, establishing a medication-assisted treatment (MAT) program modeled after successful programs in other states. In Rhode Island, the number of drug overdose deaths of recently released inmates dropped 61 percent after their MAT program's first year, with an overall 12 percent statewide decrease in overdose deaths. Florida must embrace proven evidence-based solutions like this to tackle the opioid crisis.

Expanding Medicaid is another key component to addressing the opioid epidemic in Florida. By extending healthcare to 800,000 working people, these uninsured Floridians will have access to substance abuse and mental health treatment they might otherwise not receive — yet another reason why Medicaid expansion is a moral imperative.

As governor, Gillum will also use his platform to support federal legislation addressing opioids, such as the recently passed SUPPORT for Patients and Communities Act that reduces barriers to treating substance abuse patients, and the STOP Act which aims to prevent opioids like fentanyl flooding into America from other countries. Gillum would also sign legislation similar to 2018's SB 1418, which would update licensing requirements for substance abuse providers to improve safety and effectiveness.

By recognizing this crisis as a disease, Mayor Gillum will deploy every resource available to compassionately mitigate the opioid and addiction crises.

SAFEGUARDING FLORIDA'S SENIORS

Florida is home to more than 5 million people over the age of 60, with estimates suggesting that by 2020, seniors will make up around 28% of the state's population. As even more Americans choose Florida as their retirement destination, our state will need a governor that understands and prioritizes their needs.

Over 500,000 seniors in Florida are living with Alzheimer's disease, dementia, and other disabilities — yet thousands of families sit on waitlists for the Medicaid waiver program they need to start receiving care. During the 2018 legislative session, only \$2.1 million additional funding was budgeted for these services. While this may reduce the waitlist by about 100 individuals, over 10,000 Floridians are languishing with these critical needs. Gillum will encourage lawmakers to consider creative funding sources to make Florida's critical needs waitlists a thing of the past, such as the \$171 million in tax cuts approved this year.

One of the most critical healthcare needs for seniors is nursing home, assisted living, and home-based care. Sadly, stories of seniors facing abuse and neglect under the care of providers are all too common. As governor, Gillum will direct the Department of Elder Affairs to make Florida the safest place for seniors who need eldercare. Gillum will work to improve residents' rights in nursing homes and assisted living facilities, such as guaranteeing residents access to their personal and medical records, and mandating that residents be provided with information for the State Long-Term Care Ombudsman Program. While this legislation failed last year under Republican leadership, Gillum will lead to the charge to ensure Florida's seniors have the protections they deserve.



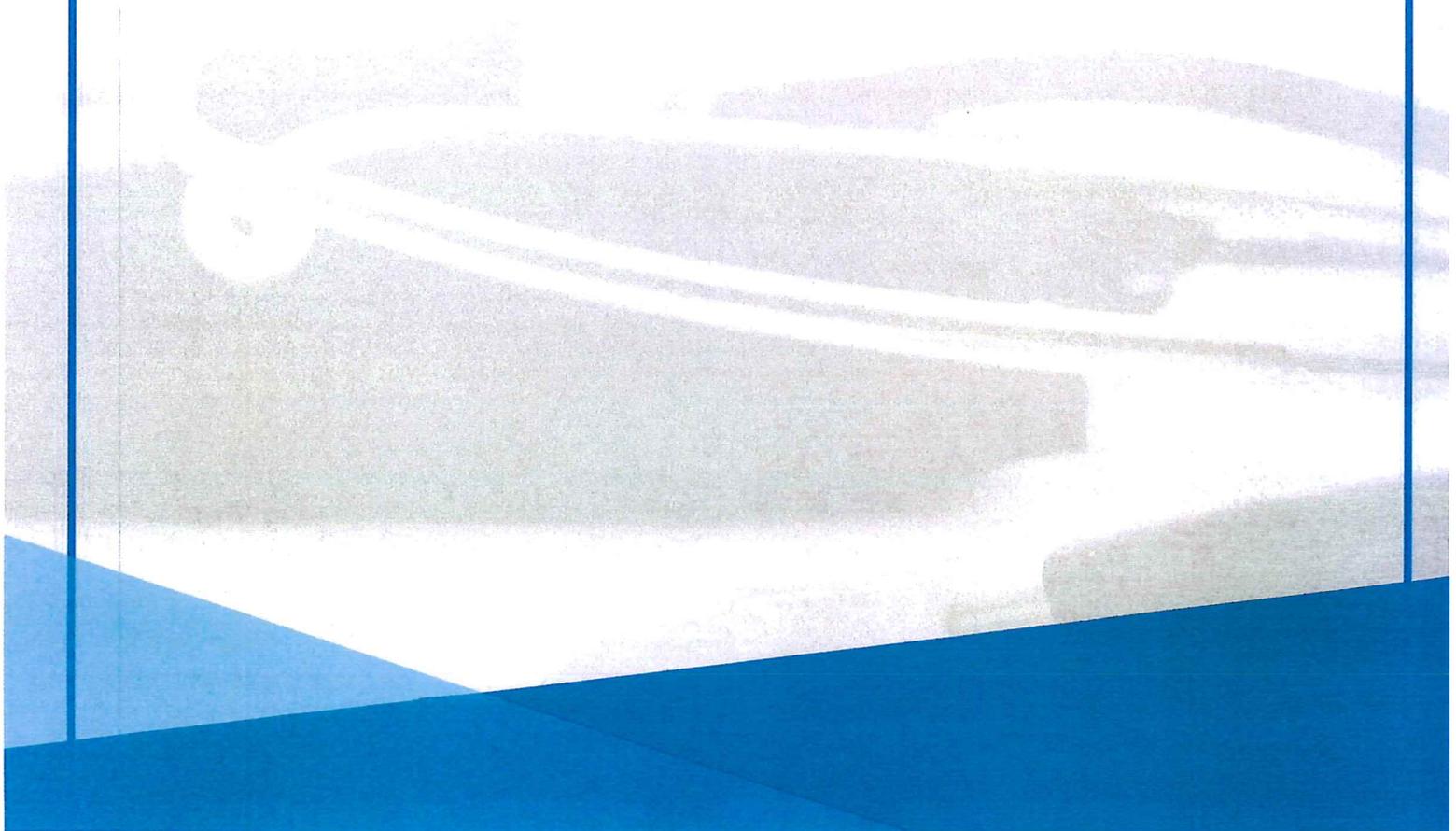
SUPPORTING MEDICARE FOR ALL

The Affordable Care Act helped provide access to affordable healthcare for 20 million Americans and more than 1.5 million Floridians. But because access to care should be within reach for every American, we must aim higher.

Medicare for All is a North Star that moves us closer to affordable healthcare as a right for everyone. For two decades, Florida's elected leaders have shrunk from the great challenges facing our state, including an uninsured rate today that is 45 percent higher than the national average — and once again rising this year. Florida ranks near the bottom in health care affordability and too many Floridians go without the care they need.

Medicare for All could help finally address these long-term issues by reining in costs and wasteful spending, while ensuring our seniors still get the high-quality care they deserve. The potential exists to provide universal coverage, while lowering national healthcare spending and reducing administrative, pharmaceutical, and provider costs.

As governor, Mayor Gillum will focus on expanding health coverage to as many Floridians as possible, while encouraging Congress to make healthcare for all Americans a reality.



THE DESANTIS PRESCRIPTION: SICKER AND POORER FLORIDIANS

Ron DeSantis would be an unmitigated disaster for Florida's healthcare.

Pre-existing Conditions: In Congress, DeSantis voted more than a dozen times to eliminate protections for people with pre-existing conditions, like cancer, asthma, and even maternity and newborn care. DeSantis is so extreme, he wouldn't even vote for Trumpcare until it specifically excluded coverage for pre-existing conditions.

His solution? DeSantis' plan for those whose coverage he'd eliminate? Just "show up to the emergency room."

Medicare: DeSantis voted to slash \$350 billion from Medicare, voucherize the program, and cut guaranteed benefits — all of which would end Medicare as we know it. He even voted to raise the eligibility age to 67, as well as for Social Security to age 70.

Medicaid Expansion: DeSantis opposes expanding Medicaid for 800,000 working Floridians. In fact, he said there's "no discernable difference" between having Medicaid and being uninsured, something with which Florida's seniors, disabled, children, and working people are sure to disagree.

Affordable Coverage: DeSantis co-sponsored the bill in Congress to stop helping people pay for their health insurance, which helped raise premiums by 38%.

[Español](#)[Home](#)[Issues](#)[Media](#)[Endorsements](#)[Volunteer](#)

Ron DeSantis: Building a Healthier Florida

A New Challenge for a New Time

By 2020, official estimates predict Florida will have a population of 26.5 million people with 20 percent over the age of 65. As our population grows and ages, our health care system must adapt and evolve. Ron DeSantis understands that a one-size-fits-all solution will not meet the diverse needs of our state. Ron DeSantis believes that we must contain costs in order to expand access and protect the quality of our health care system.

Empower Patients

Floridians have more choices in picking out their cellphone plans than their health insurance plans. Every day in the grocery store, we make decisions about what we want to buy, weighing price, necessity, and quality, and deciding what's right for us. But, when it comes to something as important as health care, we have fewer choices and less information. Government, insurance companies, and the health care bureaucracy have, by accident or by design, created a system difficult to

[^](#)

understand, hard to navigate and impossible to control. Ron DeSantis wants to tear down those barriers and empower patients. He wants to look past the 20th Century paradigm of employer-provided insurance vs. government-provided insurance. On the health care train, Ron DeSantis believes the patient should be the conductor, not the passenger. We live in a large, diverse state and Floridians have different needs and wants. In health care, one-size doesn't have to fit all.

As Governor, Ron DeSantis will ensure every patient has:

^

The Right to Buy the health care plan that works best for them and their families. We can accomplish this by modernizing Florida's insurance laws so patients have access to non-traditional products, like expanded, direct physician care agreements or tailored plans, like short-term coverage or limited-benefit plans. Ron DeSantis will push the Federal government to allow for expanded use of association health plans and to change Federal tax laws to allow individuals to carry their own individual health plans from employer to employer.



The Right to Know how much their health care really costs by aggressively implementing Florida's groundbreaking health price transparency law and giving Floridians real-time information about actual prices and outcomes.



The Right to Shop for lower cost health care options by incentivizing insurance companies to share some of the savings they realize with the patient in the form of cash payments.



- ✓ **The Right to Quality** health care by resisting any effort to ration health care by giving bureaucrats in Tallahassee control over personal health decisions.

Protect Access for Patients with Pre-Existing Conditions

Ron DeSantis believes that no person should be denied access to medical care based on the existence of a pre-existing condition. It has been a well-settled Federal law for more than 20 years that insurance companies may not exclude a pre-existing condition from coverage nor charge higher premiums for an insured who moves from one health plan to another. The recent issue related to pre-existing conditions has focused on a smaller group – people with serious health problems who are uninsured and are now mandated by Federal law to purchase insurance. Should a Federal court strike down the protections afforded to this subgroup or should Congress repeal the law, Ron DeSantis will work to ensure hard-to-insure Floridians with significant health needs have access to coverage by creating a more diverse, robust insurance market that will enable and encourage Floridians to buy insurance before they get sick.

Expand the Reach of Our Providers

A strong system requires strong components, and for Florida's health care system that means expanded training and better retention of health care workers, particularly doctors and nurses. We should partner with our universities and medical schools to bring the highest-quality programs and the most cutting-edge research

^

to Florida. Ron DeSantis wants Florida to become a national leader in medical innovation by allowing hospitals and doctors to use state-of-the-art technology, like telemedicine. In our globally-connected world, no Floridian should go untreated because of a lack of access to specialists.

Support Our Seniors

Ron DeSantis hopes all Floridians are able to lead long, happy, healthy and productive lives. However, as we age, we face challenges from the worsening of chronic diseases to age-related conditions, like dementia and Alzheimer's Disease. Ron DeSantis will fight to keep Florida's network of senior services – from community access to home care to assisted-living facilities to nursing homes – ready and able to meet the needs of our seniors.

Maintain Our Social Safety Net

Ron DeSantis recognizes government has an obligation to those who are truly unable to help themselves. He will continue to support Florida's longstanding tradition of providing access to health care and social services for economically-distressed pregnant women, children, persons with disabilities, persons suffering from catastrophic illnesses and seniors. Ron DeSantis will also keep Florida's network of safety-net hospitals strong and armed with the resources they

^

need to continue providing high-quality care to those Floridians unable to pay. He will advocate for expanded access to and early intervention of mental health and substance abuse treatment programs.

Respect Taxpayers' Money

Florida spends more public money (41.7 percent) on health and human services than on any part of the state budget, which means there is a greater risk of inefficiency, waste, fraud and abuse. As Governor, Ron DeSantis will fight to ensure Floridians see real value for their public investment. He will continue to support Florida's groundbreaking Medicaid managed-care model, which has helped to curb the growth of that entitlement program. He will also aggressively combat fraud in Medicaid and other health and human services programs. No one – no individual, no doctor, no insurance company – is above the law.

Help Floridians Struggling with Opioid Addiction

Florida has recently made some strong first steps in addressing the opioid addiction crisis but much work remains. As Governor, Ron DeSantis will advocate for expanded access to and early intervention of mental health and substance abuse treatment programs. He will work with our local partners to leverage local resources. Numerous communities, civic and religious organizations throughout the state assist victims of addiction. Rather than duplicating

^

those efforts, Ron DeSantis will help these local organizations to develop best practices, facilitate resource sharing and identify new avenues for financial support. He will also seek federal-state partnerships to bring new dollars to opioids fight, while ensuring we are measuring the real-world effectiveness of our programs.

He will also finish implementing Florida's medical marijuana constitutional amendment so sufferers of chronic pain have access to an alternative to the use of opioids. As Governor, Ron DeSantis will not let the Washington or Tallahassee bureaucracy get in the way of helping those in need.

Ron DeSantis: Tear Down Barriers and Empower Patients

LEARN MORE

DESANTIS
NUÑEZ
FOR
GOVERNOR

Fighting for Good Jobs, Better Schools, Clean Water, and Safe Communities 

Paid by Ron DeSantis, Republican, for Governor.

Use of military rank, job title, and photograph in uniform does not imply endorsement by the Department of Defense.

Contributions are not deductible for Federal income tax purposes.

Ron DeSantis for Governor
610 S. Boulevard, Tampa, FL 33606
info@rondesantis.com
(407) 796-1441

