

A Better Approach on Health Care

By U.S. Senator Lindsey Graham (R-South Carolina)

Obamacare is not working and is unlikely to ever work. It was designed as a rigid, one-size-fits-all health care system which hands money, control, and decision-making on health care to bureaucrats in Washington.

It ignores the fact that doctors, hospitals, and health care providers in a town, community or state generally know the needs of their patients better than even the best-intentioned bureaucrat in our nation's capital.

I believe it is time we change that dynamic.

Graham-Cassidy

Working with my colleague in the Senate, Dr. Bill Cassidy from Louisiana, governors from across the United States, and the Trump Administration; we have developed an approach that returns money, power, and control of health care decisions to the towns, communities, and states.

Our legislative proposal – commonly known as Graham-Cassidy – takes the money the federal government currently spends on Obamacare and returns it to the states in the form of a block grant. States are then able to use the money to best meet the needs of the patients in their towns and cities. We also uphold the part of Obamacare that is widely supported – forcing insurance companies to cover individuals with pre-existing conditions.

This model – returning money and control to the states and localities – has been used before with great success when we reformed welfare. It freed states from the grips of a Washington-knows-best bureaucracy and allowed for innovation and cutting edge reforms.

Each State's Health Care Needs Are Unique

Just like no two patients are exactly alike, no two states health care needs are the same either. Some states have a higher incidence rate of certain diseases. Other states have populations that want to forgo more expensive health care plans for the cheaper alternative. Red states generally have populations that value the free market and competition, while blue states might have populations that want to move toward a more socialized health care system.

With that in mind, states and localities will come up with solutions that work best for them. Some states will likely invest in new health clinics while others will work on making private insurance more affordable. Some will seek to provide broad-based preventive screenings while others will focus on at-risk populations. States may even try approaches we haven't thought of yet.

In each case, local leaders – working with local health care providers – will be empowered to design health care solutions that work best for the needs of their state. I truly believe the most efficient and effective solutions to our health care needs will be found in a local community, not in Washington.

A Better Approach to Health Care

Momentum continues to grow for a new approach which puts states, towns, and local communities in charge of health care. I will continue to work with governors, the administration and health care professionals to improve and refine the proposal. However, I remain confident that it will eventually become the law of the land.

Across America, I've heard overwhelming support for moving the money and power out of Washington and back to states and localities. Ultimately, we will succeed in allowing the states to design and deliver quality health insurance for their citizens.

Obamacare has made it clear to millions of Americans that when it comes to health care, Washington does not have all the answers. It's time we try a different approach.

