

# TEXAS HEALTHCARE INDEPENDENCE INITIATIVE

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# SECTION 1 - EXECUTIVE SUMMARY

Texas families are carrying a growing healthcare burden. Premiums rise every year. Bills arrive with prices that do not match the care received. Hospitals struggle with inflated supply costs, and insurance companies make decisions that favor profit instead of fairness. Rural communities lose clinics that once held their towns together. The stress has become personal for Texans who work every day, raise families, and try to stay healthy without being crushed by medical debt.

Texas has reached a point where doing nothing is no longer an option. The system is too expensive, too unpredictable, and too open to manipulation by corporate interests that do not answer to Texans. Costs rise long before a patient visits a clinic or hospital, and those inflated numbers become the foundation for every bill a family receives. When the base cost is broken, everything built on top of it hurts Texans.

This initiative sets a new path forward. It focuses on lowering healthcare costs at the source, protecting families from inflated pricing, and strengthening the clinics and hospitals that Texas communities depend on. The plan uses statewide purchasing power to lower supply costs, cost-plus pricing rules to prevent inflated bills, and a unified risk standard that stops insurance companies from playing games with premiums. All care stays private. Hospitals stay private. Doctors stay independent. Texas steps in only to make sure the system is fair and honest.

Lowering costs at the source stabilizes the entire healthcare system. When supplies are affordable, hospitals operate with less financial pressure. When hospitals have predictable expenses, they charge patients fairer prices. When insurers cannot manipulate risk pools, premiums stop rising without cause. When rural clinics have stable margins, they stay open and serve their communities. Every piece supports the next.

This initiative protects Texans by fixing the parts of healthcare that have been ignored for too long. It shields families from inflated bills, strengthens hospitals, stabilizes premiums, and keeps rural communities connected to essential care. Texas has the size, strength, and independence to build a system that puts people before corporate profit. A healthcare system Texans can trust begins with lowering costs, enforcing fairness, and making sure families are never punished for getting the care they need.

This is the Texas standard. And this initiative delivers it.

## **SECTION 2 - CONTEXT AND PROBLEM STATEMENT**

### ***2.1 Rising Costs Texans Cannot Escape***

Across the state, families are being hit with premiums, deductibles, and medical bills that do not match the care they receive. Costs rise even when nothing about a person's health has changed. Many Texans avoid going to the doctor unless they absolutely have to because one visit can wipe out a paycheck. Even families with what they believe is good insurance often end up with surprise bills they never expected.

Texans are paying more and getting less. That is the reality they face every day.

### ***2.2 Inflated Supply Chains Driving Prices Up***

Behind every bill is a deeper problem. Hospitals pay inflated prices for simple supplies long before a patient ever walks in the door. Items like gloves, IV bags, saline, gauze, syringes, and basic equipment move through layers of middlemen who drive up prices for their own gain.

These inflated costs get built into every procedure, every ER visit, and every surgery. By the time the bill reaches a Texas family, they are paying for a supply chain that was never designed to protect them.

### ***2.3 Insurance Companies Manipulating Risk***

Insurance companies amplify the problem. They divide Texans into separate risk categories based on zip code, age, small medical history details, or statistical models that do not reflect a person's actual health. These categories are often used to justify higher premiums.

A family can do everything right, stay healthy, and make responsible choices, yet their premiums still rise year after year. Small businesses suffer even more. Without negotiating power, many employers are forced to downgrade coverage or drop insurance entirely.

## ***2.4 Rural Texas Left Behind***

Rural hospitals and clinics operate on tight budgets. When supply costs rise or reimbursements fall short, they have no room to recover. Many are forced to cut services or close their doors. When a rural hospital closes, families lose immediate access to emergency care, maternity care, and basic medical services.

Travel times increase. Response times increase. Outcomes get worse. And for many rural communities, the loss of a hospital is the beginning of long-term decline.

## ***2.5 Federal Instability Making It Worse***

Texas is tied to federal swings that make healthcare unpredictable. Subsidies rise and fall. Federal rules change. National insurance companies adjust pricing models for the entire country, not for the needs of Texans. When Washington shifts direction, Texans get stuck with premium spikes and sudden coverage changes.

Texas needs stability. Texans should not have to wait on federal decisions to know what their healthcare will cost next year.

## ***2.6 Why Texas Must Take Control of Healthcare Costs Now***

If Texas does not act, costs will continue to rise, more hospitals will close, and more families will avoid care because they cannot afford the risk of another bill. The state cannot rely on federal systems that change every few years and cannot allow insurance and supply corporations to dictate what Texans pay.

Texas must step in, lower costs at the source, and build a system that protects families, strengthens hospitals, and brings stability back to healthcare across the entire state.

## **SECTION 3 - EXPLANATION OF THE CORE PROBLEM**

The core problem in Texas healthcare is not the care itself. It is the cost structure behind the care. Texans are paying for layers of inflated prices, hidden contracts, and insurance tactics that have nothing to do with medical treatment. These are the real issues driving up bills for Texas families.

### ***3.1 Artificial Pricing Built Into Every Medical Bill***

The cost of care is inflated long before a patient reaches a hospital.  
Texas families end up paying for structural problems they never see.

The core issues include:

- supply markups added by multiple distributors
- long-term contracts hospitals cannot escape
- inflated baseline costs insurers use to justify premium increases
- billing systems built on prices that do not match real expenses

These inflated numbers become the foundation of every bill sent to Texas families.

### ***3.2 Middlemen Inflating Supply Costs***

Most hospitals do not buy directly from manufacturers.  
They buy through distributors who control pricing and add cost at each step.

This leads to:

- simple items marked up hundreds of percent
- hospitals competing with each other instead of negotiating together
- rural hospitals paying the highest prices
- supply costs becoming the largest hidden driver of medical bills

Families end up paying for a supply chain that does not serve them.

### *3.3 Insurance Companies Using Inflated Numbers to Raise Premiums*

Insurers build premiums off hospital cost structures.

When hospital prices are inflated, insurers raise premiums instead of challenging the contracts.

Insurance companies often:

- use inflated hospital prices to justify yearly premium hikes
- avoid pushing back on distributors because they pass costs to customers
- place responsibility on families instead of the supply chain
- rely on complexity to hide how premiums are calculated

Premiums increase even when actual care has not changed.

### *3.4 Risk Segmentation Used to Overcharge Texans*

Insurance companies divide Texans into different categories to raise prices, including:

- zip code
- age
- minor medical history
- regional cost maps
- statistical models that do not reflect real risk

These tactics let insurers increase premiums even when a family's health stays the same.

Small businesses suffer most because they cannot negotiate like large corporations.



### *3.5 Lack of Unified Texas Purchasing Power*

Texas is large enough to negotiate like a country, but hospitals negotiate alone.

The current structure forces:

- small and rural hospitals to pay more than large systems
- hospitals to accept contracts they cannot influence
- communities to absorb the cost of weak bargaining positions
- supply companies to profit at Texas' expense

Texas has the population size and economic scale to fix this, but no unified system exists.

### *3.6 Rural Regions Hit the Hardest*

Rural hospitals operate with little financial protection.

They face:

- high supply costs
- unpredictable reimbursements
- thin margins
- difficulty attracting staff
- increased risk of closure

When a rural hospital closes, emergency care, maternity care, and basic services disappear from an entire region.

### *3.7 Federal Instability Makes Prices Worse*

Texas is tied to federal decisions that change constantly.

This creates:

- premium swings every time subsidies shift
- unstable reimbursement models
- federal rules that are not built for Texas
- insurance companies raising prices in response to national trends

Texas needs stability, but the current system does not provide it.

### *3.8 The Root Problem*

When you step back, the core problem becomes clear:

- Texans are not paying for healthcare
- Texans are paying for a broken cost structure

A structure built by:

- inflated supply chains
- insurance manipulation
- weak negotiating power
- federal instability
- rural vulnerability

Until Texas takes control of the cost structure at the source, nothing else will change.

## SECTION 4 - DEEP BREAKDOWN OF THE MAIN SOLUTION

Texas can fix the cost of healthcare by targeting the root causes of inflated pricing, insurance manipulation, and rural instability. This initiative brings the entire system back under Texas control without replacing private insurance, without running hospitals, and without turning healthcare into a government program. It focuses on **lowering costs at the source**, enforcing **fair rules**, and giving Texans a system they can trust.

### *4.1 Texas Bulk Medical Purchasing Authority*

Texas creates a statewide purchasing system that uses the state's full population size to negotiate like a major national buyer.

This authority will:

- buy medical supplies in large-volume contracts
- negotiate directly with manufacturers instead of middlemen
- eliminate inflated distributor markups
- sell supplies to hospitals and clinics at cost plus a small margin
- guarantee stable supply even during emergencies
- support rural hospitals that cannot negotiate on their own

This step is designed to lower the real cost drivers of healthcare across the state by reducing inflated supply pricing.

## *4.2 Cost-Plus Supply Distribution to Hospitals and Clinics*

Texas will use a transparent cost-plus model to prevent inflated hospital billing. Hospitals receive supplies at fair cost and cannot pass inflated supply prices to patients.

This system ensures:

- no hidden middleman fees
- predictable and fair supply pricing
- hospitals still recover operating costs
- patients are protected from inflated charges
- ER visits, childbirth, and surgeries become more affordable

Families finally get bills tied to real costs instead of inflated supply chain pricing.

## *4.3 Fair Pricing Rules for Patients and Families*

Texas will set clear limits on how much hospitals can charge for medical supplies and equipment **purchased through the state purchasing system**.

This includes:

- cost-based pricing rules
- safeguards against excessive markups
- consistent statewide billing standards
- immediate price relief for common procedures
- better protections for uninsured and underinsured Texans

Texans get direct, noticeable relief from medical bills.

### *4.3.1 Patient Savings Pass-Through Requirement*

Participation in the Texas Bulk Medical Purchasing System requires that cost savings generated through state-negotiated medical supplies be passed directly to patients.

Any hospital, clinic, or facility that purchases supplies through the state system must:

- Apply reduced supply costs directly to patient-facing charges associated with those supplies
- Prohibit markup of state-purchased supplies beyond the approved cost-plus margin
- Reflect supply cost reductions in cash prices for uninsured and underinsured patients
- Ensure that savings are applied at the point of billing, not absorbed into unrelated administrative or financial categories

Hospitals may not retain supply cost savings generated through state participation without demonstrating that those savings have directly reduced patient charges or improved access to care in measurable ways approved by the state.

This requirement applies only to supplies purchased through the state system and does not regulate independently sourced materials unless authorized by law.

The purpose of this rule is simple: when Texas lowers costs at the source, Texas families must feel the benefit.

Failure to comply with this requirement may result in removal from the state purchasing program and public disclosure of noncompliance.

## *4.4 Unified Texas Risk Standard for Premium Stability*

Texas will establish a unified risk standard for **state-regulated health insurance plans**, including individual and fully insured employer plans under Texas jurisdiction. Self-funded employer plans governed by federal ERISA law are

outside direct state control. This reform focuses on the insurance markets Texas is legally authorized to regulate, while advocating broader alignment where possible.

This standard will:

- prevent insurers from dividing Texans by zip code
- stop premium spikes based on non-medical factors
- reduce sudden rate increases
- stabilize small business premiums
- force insurers to use real cost data

All private insurance stays private.

Texas simply enforces fair rules across the market.

#### *4.5 Transparency Enforcement for Hospitals and Insurers*

Federal law already requires hospital price transparency; this initiative strengthens enforcement, standardizes disclosures for Texans, and adds state-level accountability where permitted by law.

Texas will enforce strong transparency requirements to ensure families know what they will pay before receiving care.

This includes:

- mandatory price posting for standard procedures
- clear and readable insurance plan disclosures
- penalties for hidden fees
- enforcement actions against deceptive billing
- public access to a simple statewide price database

Transparency protects Texans from surprise charges and misleading premiums.

#### *4.6 Support Framework for Rural Hospitals and Trauma Centers*

Texas will strengthen rural healthcare networks through:

- discounted supply pricing
- stable reimbursements
- telehealth access
- predictable logistics
- emergency supply reserves
- financial pressure relief through unified purchasing

Rural hospitals will no longer face collapse because of inflated supply contracts.

#### *4.7 Lowering Childbirth Costs to Strengthen Texas Families*

Childbirth in Texas has become too expensive for young families.

This initiative lowers childbirth costs by:

- reducing supply costs built into delivery fees
- stabilizing hospital operating expenses
- creating predictable pricing for maternity services
- removing inflated charges passed to families

Affordable childbirth strengthens Texas' long-term growth and family stability.

#### *4.8 Protecting Uninsured and Underinsured Texans*

Even Texans without insurance benefit directly from:

- lower ER costs
- reduced procedure charges
- fair pricing rules
- stronger rural access
- more stable outpatient services

Lower supply costs reduce the burden on everyone, insured or not.

#### *4.9 How This Reform Strengthens Every Other Statewide Initiative*

This initiative supports Texas-wide goals by:

- reducing medical debt, which supports housing stability
- improving workforce participation
- reinforcing rural communities for water and infrastructure programs
- strengthening statewide emergency resilience
- giving veterans, teachers, and first responders better access to care

Lower healthcare costs strengthen every other Texas initiative we are building together.



## SECTION 5 - ENGINEERING, TECHNOLOGY, AND SYSTEM DESIGN

Texas does not need a complex or federal-style system to fix healthcare costs. It needs a **clear, statewide structure** that uses Texas purchasing power, Texas logistics, Texas data systems, and existing Texas agencies. This section explains how the system operates behind the scenes without disrupting hospitals, clinics, or doctors.

### *5.1 Statewide Supply Forecasting and Usage Modeling*

Texas will build a simple but powerful forecasting model that shows what hospitals and clinics use, how often, and where supplies are most needed.

The system will:

- collect voluntary usage reports from hospitals
- analyze five-year supply trends
- identify seasonal and regional patterns
- calculate realistic supply needs
- prevent shortages during emergencies
- guide statewide purchasing decisions

This helps Texas buy the right supplies at the right time and avoid inflated emergency orders.

## *5.2 Texas Digital Procurement and Logistics Systems*

Texas will create a centralized digital platform that tracks supply orders, shipments, and deliveries statewide.

The platform will:

- place bulk purchase orders
- track inventory at regional hubs
- monitor supply expiration dates
- coordinate deliveries for rural clinics
- prevent duplicate or wasteful orders
- show hospitals exactly what they are paying for

This system keeps supply procurement transparent and affordable.

## *5.3 Hospital Inventory Reporting and Auditing*

Hospitals and clinics will report basic inventory information through a simple digital dashboard.

Texas will not add complicated paperwork.

It replaces the scattered systems hospitals already struggle with.

This reporting system will:

- show real-time regional supply needs
- prevent supply hoarding or shortages
- allow for quick replenishment
- support emergency distribution
- identify unusual spikes that may signal fraud or abuse

- keep the process transparent for everyone

Hospitals get better visibility. Texas gets better oversight.

#### ***5.4 State Distribution Hubs and Emergency Stock Reserves***

Texas already has warehouses, emergency supply centers, and logistics facilities. This initiative expands their use to serve healthcare needs.

Texas will:

- convert existing state facilities into regional supply hubs
- maintain emergency reserves for crisis situations
- use pre-positioned storage to speed up deliveries
- rotate inventory to reduce waste
- use DPS, TDEM, and State Guard facilities when needed
- shorten delivery times across the state

A stable supply chain means hospitals can focus on patients, not shortages.

#### ***5.5 Telehealth Systems for Rural and Underserved Regions***

Telehealth is one of the fastest ways to help rural communities.

Texas will build a statewide telehealth network that connects rural clinics to specialists in larger cities.

This system will:

- give rural doctors access to specialist consults
- reduce the need for long-distance transfers
- improve maternal and mental health care

- support veterans and first responders
- reduce delays in diagnosis
- keep families closer to home

Telehealth strengthens rural Texas without replacing local doctors.

## *5.6 Data Protections and Cybersecurity*

Texas will enforce strong cybersecurity standards to keep hospital and patient information safe.

The system will include:

- encrypted data transfer
- secure access controls
- regular cybersecurity audits
- emergency incident response teams
- protections against supply chain cyberattacks
- compliance with existing Texas privacy laws

Texas protects patient information without creating new federal-style databases.

## *5.7 All Facilities Follow Existing Texas Building Codes*

This initiative does not change building rules.

Hospitals, clinics, supply hubs, and telehealth facilities will continue operating under:

- current Texas building codes
- existing safety and fire standards

- local authority requirements
- established regulatory protections

Texas does not add red tape.

Texas removes the unnecessary costs that harm families and hospitals.

## **SECTION 6 - INTEGRATION WITH STATE INFRASTRUCTURE AND AGENCIES**

Texas does not need to build a brand-new government bureaucracy. The state already has powerful agencies, strong logistics networks, and experienced personnel who can support a healthcare cost-control system without slowing it down. This section explains how existing state systems plug into the initiative and keep it efficient, simple, and Texas-run.

### ***6.1 Coordination With Health and Human Services***

The Texas Health and Human Services Commission already manages major health programs, emergency medical services, and regulatory oversight.

Through this initiative, HHS will:

- coordinate statewide purchasing efforts
- streamline hospital onboarding
- enforce fair pricing and transparency
- monitor rural stability
- support supply forecasting and reporting
- issue compliance guidance without adding burdens

HHS becomes the anchor that keeps the system consistent across Texas.

## *6.2 Alignment With the Texas Department of Insurance*

The Texas Department of Insurance regulates how insurers operate in the state. This initiative strengthens TDI by giving it better data, clearer rules, and stronger enforcement tools.

TDI will:

- enforce the unified Texas risk standard
- review premium changes for fairness
- stop unfair risk segmentation
- ensure insurers use real cost data
- investigate deceptive practices
- provide Texans with clearer information about their plans

TDI keeps insurance companies honest and accountable.

## *6.3 Support for Rural Hospital Networks*

Rural hospitals are one of the biggest priorities in this initiative. They hold entire regions together.

Texas will support rural networks by:

- lowering supply costs across the board
- offering predictable reimbursements
- improving telehealth access
- coordinating emergency transfers
- ensuring supply deliveries reach remote areas
- protecting essential services like ER and maternity care

Rural communities cannot thrive without strong local healthcare.

### *6.4 Use of Existing State Procurement Authority*

Texas already purchases supplies for agencies, schools, prisons, and emergency operations.

This initiative expands that authority to include medical supplies.

Texas will:

- negotiate long-term contracts with manufacturers
- get lower prices by buying in bulk
- unify state and regional supply chains
- reduce administrative costs
- strengthen local manufacturing when possible

This approach keeps costs low without creating a new layer of government.

### *6.5 Logistics Support Through the Texas State Guard*

The Texas State Guard brings statewide logistics experience that can support supply deliveries during emergencies and high-demand periods.

State Guard support will include:

- emergency deployments during disasters
- rapid delivery to rural hospitals
- movement of emergency supplies
- setup of temporary clinics when needed
- coordination with local jurisdictions



- reinforcing state and regional supply hubs

This keeps the healthcare system resilient when Texas needs it most.

## *6.6 Partnerships With Medical Schools and Health Centers*

Texas has strong medical schools, training programs, and community health centers. These partners can help build a stable, long-term system.

Partnerships will provide:

- telehealth support
- staffing pipelines for rural communities
- clinical rotation opportunities
- coordinated mental and maternal health services
- research support for cost reduction strategies

Texas grows its own healthcare workforce when statewide systems are aligned.

## *6.7 Coordination With Existing State Systems*

This initiative does not merge programs, consolidate agencies, or create shared databases across unrelated state efforts. Coordination refers only to aligning healthcare cost controls, procurement standards, logistics support, and transparency enforcement within existing legal authority. Any coordination with other state programs will be publicly disclosed, limited in scope, and subject to existing privacy, procurement, and oversight laws.

## 6.8 What the Governor Can Do and What Requires the Legislature

### **Governor Authority:**

- Direct coordination among HHSC, TDI, and existing procurement systems
- Launch pilot purchasing programs using state-controlled healthcare plans and facilities
- Enforce transparency and compliance using existing regulatory authority
- Deploy emergency medical logistics through the Texas State Guard
- Publish statewide cost, access, and compliance reports

### **Requires Legislative Authorization:**

- Creating a permanent Texas Bulk Medical Purchasing Authority
- Mandating participation by private hospitals or insurers
- Expanding insurance risk rules beyond state-regulated plans
- Establishing new penalties, taxes, or long-term funding mechanisms

## **SECTION 7 - DEPLOYMENT STRATEGY AND PRIORITIZATION**

This initiative rolls out in clear, manageable phases so hospitals, clinics, insurers, and rural communities can transition smoothly. Texas will move fast enough to deliver real relief, but steady enough to avoid disruption. Each phase builds on the last, lowering costs step by step until the system becomes stable, predictable, and fair for every Texan.

### ***7.1 Phase One: Rural and High-Cost Regions***

Texas begins where the need is greatest.

Phase One focuses on:

- rural hospitals at risk of closure
- regions with the highest supply costs
- maternity deserts and trauma deserts
- clinics serving uninsured and underinsured Texans
- areas with long ambulance response times
- regions with high emergency room usage

This first phase delivers immediate relief where Texans feel the most pressure.

### ***7.2 Phase Two: Urban Hospital and Clinic Integration***

Once rural and high-cost regions stabilize, the initiative expands to major urban areas.

Phase Two includes:

- large hospital systems
- outpatient surgical centers

- urgent care facilities
- high-volume emergency rooms
- county health centers
- private clinics

Urban integration lowers statewide costs by bringing in the largest users of medical supplies.

### *7.3 Phase Three: Statewide Risk Standard Transition*

Texas will shift insurers into the unified Texas risk standard that stops unfair premium spikes.

This phase:

- eliminates zip-code-based pricing manipulation
- prevents risk segmentation across regions
- ensures premiums match real medical costs
- protects small businesses from sudden increases
- stabilizes premiums year after year

Premium stabilization becomes a core benefit for Texans.

## *7.4 Phase Four: Full Transparency Enforcement*

Texas will enforce clear pricing and insurance disclosures once hospitals and insurers are aligned with the new model.

This phase includes:

- posted procedure prices
- standard billing formats
- upfront cost estimates
- penalties for deceptive fees
- insurer transparency on premiums and coverage
- public access to a statewide price database

Texans get simple, predictable billing they can finally understand.

## *7.5 Hospital Onboarding and Compliance*

Texas will onboard hospitals in groups to avoid disruption.

The onboarding process will:

- assign hospitals to phased groups
- provide training on cost-plus billing rules
- connect facilities to regional supply hubs
- test transparency compliance tools
- resolve logistical issues early
- support rural and small facilities throughout the transition

Hospitals get a smooth, guided pathway into the new system.

## *7.6 Insurer Alignment and Premium Oversight*

Insurers will adjust their premium models based on real, verifiable costs.

This step will:

- require insurers to submit premium calculations
- confirm compliance with the unified risk standard
- block unjustified premium increases
- require transparency in plan details
- review small business plans for fairness
- enforce penalties on bad-faith actors

Insurance companies do not get to raise rates without proof.

## *7.7 Annual Review and Reporting to Texans*

Texas will conduct a yearly evaluation to keep the system strong and honest.

These annual reports will show:

- changes in supply costs
- hospital stability and service levels
- premium trends
- rural access improvements
- billing transparency compliance
- emergency readiness
- impacts on childbirth costs

Texans will know exactly what is improving and what still needs work.

## **SECTION 8 - WORKFORCE, LOGISTICS, AND IMPLEMENTATION**

Texas will need a steady, reliable workforce to run a statewide healthcare cost-control system. This does not mean more bureaucracy. It means using the people Texas already has, training new talent for logistics and supply chain careers, and strengthening the teams that support hospitals and clinics across the state. Implementation focuses on efficiency, speed, and the ability to operate in both normal conditions and emergencies.

### ***8.1 Building a Statewide Healthcare Logistics Workforce***

Texas will develop a practical logistics-focused workforce to support hospitals, rural clinics, and distribution hubs.

This workforce will include:

- supply chain technicians
- regional delivery drivers
- emergency transport teams
- warehouse and inventory specialists
- forecasting and data analysts
- telehealth support staff

These roles strengthen the system without adding unnecessary layers of administration.

## ***8.2 Training Texans in Procurement and Medical Supply Chain Careers***

Texas has workers ready to fill these jobs but lacks training pathways tailored to healthcare logistics.

This initiative fills that gap.

Texas will:

- partner with community colleges
- establish fast-track certification programs
- provide training for veterans entering the workforce
- connect graduates to rural facilities
- offer cross-training for existing hospital staff
- support apprenticeships with state distribution hubs

These programs put Texans into stable jobs that support statewide healthcare.

## ***8.3 Supporting Rural Staff and Clinical Teams***

Rural staff are the backbone of small-town healthcare.

This initiative gives them the support they need to stay in their communities.

Support will include:

- stable supply costs
- predictable reimbursements
- telehealth connectivity
- emergency supply reserves
- regional backup teams



- specialty consult access for complex cases

This protects rural healthcare from burnout and staffing shortages.

## ***8.4 Emergency Distribution and Crisis Readiness***

Texas must be able to move supplies fast during hurricanes, floods, wildfires, heat waves, and public health emergencies.

Crisis readiness will include:

- emergency transport routing
- pre-positioned supply reserves
- mobile distribution teams
- support from the Texas State Guard
- rapid hospital resupply capabilities
- disaster coordination with TDEM and DPS

Texas becomes far more resilient when medical supply shortages do not derail care.

## ***8.5 Strengthening Medical Education Pipelines***

The initiative supports long-term workforce growth by expanding education pipelines.

Texas will:

- work with medical schools and nursing programs
- create rural-focused residency paths
- support telehealth training
- expand clinical rotations in underserved regions

- strengthen partnerships with teaching hospitals
- coordinate training with statewide logistics systems

These steps give Texas a stable healthcare workforce for future generations.

## ***8.6 Veteran and State Guard Roles in Healthcare Logistics***

Texas veterans and State Guard members bring unique experience that strengthens logistics operations.

They can serve in:

- emergency supply distribution
- rural support deployments
- warehouse and transport operations
- on-site disaster response
- telehealth outreach logistics
- training and leadership positions

This gives veterans strong career opportunities and strengthens statewide readiness.

## ***8.7 Local and Regional Partnerships***

Texas will work directly with local governments, hospital districts, and community organizations.

Partnerships will include:

- coordination with county health departments
- cooperation with city EMS units
- integration with local clinics and fire departments

- shared emergency response plans
- community-based health outreach
- joint training programs

Local voices remain part of every decision.

Texas builds the system, but communities help shape how it works.

## **SECTION 9 - FINANCING MODEL AND LONG-TERM STABILITY**

This initiative does not rely on new taxes or federal programs. It focuses on controlling the real cost of healthcare by fixing the pricing structure behind it. Texas lowers costs at the source, stabilizes the system, and makes hospitals more financially secure without adding new burdens to families or businesses. The financing model is built for long-term strength, transparency, and independence.

### ***9.1 Cost-Plus Revenue Model for Sustainability***

The Texas Bulk Medical Purchasing Authority will operate with a simple and transparent cost-plus model.

This model includes:

- purchasing supplies in bulk at negotiated prices
- selling them to hospitals at cost plus a modest margin
- reinvesting that margin into operations and emergency reserves
- avoiding profit-driven pricing
- stabilizing statewide supply expenses
- preventing inflated hospital charges

This is designed to be a self-sustaining system that does not require new taxes, using savings and modest margins to fund operations.

### ***9.2 Redirecting Existing Subsidy Structures***

Texas already spends billions on healthcare support, subsidies, and emergency services.

This initiative redirects those dollars more efficiently.

Texas will:

- reduce wasteful spending caused by inflated supply contracts
- lower emergency medical costs by stabilizing rural hospitals
- streamline Medicaid-related supply expenses
- cut down on high-cost last-minute procurement
- reinvest savings into rural stability and emergency readiness

Texas makes existing dollars work harder without raising taxes.

### *9.3 Savings From Reduced Emergency and Uncompensated Care*

When hospitals get stable supply costs and predictable reimbursements, emergency rooms operate more efficiently.

This reduces:

- uncompensated care
- emergency room overload
- high-cost transfers
- avoidable hospital closures
- financial pressure on trauma centers

Texas saves money when hospitals are not forced into financial crises.

### *9.4 Stabilizing Medicaid and Rural Reimbursements*

The initiative strengthens Medicaid delivery without expanding federal dependency.

Texas will:

- provide clear supply cost savings

- support predictable reimbursement structures
- protect rural hospitals from sudden financial swings
- streamline state-level Medicaid operations
- reduce inflated costs built into Medicaid billing

This strengthens Medicaid without raising state spending.

### *9.5 Long-Term Premium Reduction Through Real Cost Control*

Long-term premium moderation is achieved by controlling the cost drivers insurers use to justify increases.

This is accomplished by:

- lowering hospital supply costs
- standardizing risk calculations
- enforcing transparency
- preventing risk segmentation
- requiring insurers to use real data
- blocking unjustified premium spikes

Texas builds a premium model based on fairness, not manipulation.

### *9.6 Protecting Texas From Corporate Capture*

The biggest danger to healthcare is when corporate interests shape the system around themselves instead of the people.

This initiative blocks that throughout the financing model.

Protection includes:

- banning inflated supply markups
- enforcing premium transparency
- punishing deceptive billing
- preventing insurer dominance over rural regions
- protecting families from corporate-driven premium increases
- creating a Texas-run cost structure that cannot be manipulated

Texas ensures the system works for Texans, not corporate headquarters.

### *9.7 Economic Benefits of Affordable Childbirth and Family Growth*

Texas cannot grow if young families cannot afford childbirth or early healthcare.

This initiative supports family growth by:

- lowering hospital delivery costs
- reducing financial stress on new parents
- strengthening maternity care in rural regions
- improving affordability for prenatal and postnatal services
- reducing the risk of debt-driven delays in family planning

A stronger Texas economy begins with healthier and more confident families.

## **SECTION 10 - SECONDARY BENEFITS AND LONG-TERM IMPACT**

Lowering healthcare costs does more than help families pay their bills. It strengthens every part of the Texas economy. It supports rural towns, protects small businesses, and makes the entire state more resilient. When Texans can afford care, when hospitals are stable, and when insurance companies cannot manipulate prices, the long-term gains spread across every community.

### ***10.1 Stronger Family Finances***

Reducing the cost of healthcare creates direct financial relief for Texas families.

This includes:

- fewer surprise bills
- more predictable out-of-pocket expenses
- lower premiums over time
- less medical debt
- improved financial stability for young families
- reduced pressure on household budgets

Families get room to breathe.

### ***10.2 Reduced Medical Debt and Bankruptcies***

Medical debt is one of the major reasons families fall into serious financial trouble and bankruptcy

This initiative reduces:

- unpaid emergency room bills
- high-interest medical debt



- collections and credit damage
- bankruptcy filings linked to healthcare costs
- long-term financial distress for working families

Texans should not lose everything because of one medical emergency.

### *10.3 Improved Maternal and Infant Health*

Lowering the cost of childbirth protects Texas mothers and children.

Improvements include:

- reduced delivery costs
- better prenatal access
- stronger rural maternity services
- earlier intervention for complications
- stable financial footing for new parents

Healthier families mean a stronger future for Texas.

### *10.4 Stronger Rural Hospitals and Community Stability*

When rural hospitals stay open, whole communities stay alive.

Benefits include:

- stronger emergency care access
- shorter travel times
- improved trauma outcomes
- better maternity care

- increased local employment
- long-term population stability

Rural Texas becomes more resilient.

### *10.5 Lower Premiums for Small Businesses*

Small businesses struggle with unpredictable insurance costs.

This initiative:

- stabilizes business premiums
- stops regional cost manipulation
- reduces the risk of sudden rate hikes
- improves employee retention
- strengthens local economic growth

Healthy workers support healthy businesses.

### *10.6 Reduced Strain on Emergency Rooms*

When care becomes affordable and stable, ERs are no longer overloaded by preventable crises.

This reduces:

- long wait times
- overcrowded trauma bays
- high-cost emergency admissions
- hospital burnout and staffing fatigue

More Texans can get help in the right place at the right time.

### *10.7 A Healthier Statewide Workforce*

Texas needs a strong workforce to stay competitive.  
Healthcare costs are a major barrier.

Workforce benefits include:

- fewer missed workdays
- fewer untreated chronic conditions
- lower stress from medical bills
- healthier long-term outcomes
- better productivity across industries

Healthier Texans build a stronger Texas.

### *10.8 A More Resilient and Independent Texas Economy*

By reducing healthcare costs statewide, Texas protects its economy from shocks and instability.

This initiative supports:

- local job growth
- rural economic recovery
- stronger family formation
- better public health outcomes
- reduced dependency on federal systems
- pro-growth stability for decades

A balanced, resilient, and competitive Texas economy begins with affordable healthcare.

## SECTION 11 — FAQ SECTION

This FAQ gives Texans clear answers to the most common questions about how the Texas Healthcare Independence Initiative works, what it changes, and how it protects families. Each response is written in plain-talk and focuses on what Texans care about most: cost, access, fairness, and independence.

### *11.1 How does this lower my medical bills?*

This initiative lowers bills by fixing the cost structure behind them.

It reduces:

- inflated supply prices
- hidden distributor markups
- unpredictable hospital billing
- insurance-driven premium hikes
- unnecessary fees tied to supply contracts

When Texas controls the cost at the source, families feel the relief directly.

### *11.2 Will this raise my taxes?*

No.

This initiative runs on:

- bulk purchasing savings
- cost-plus supply margins
- redirected existing healthcare spending
- reduced emergency and uncompensated care costs

Texas fixes the system without raising taxes on families or businesses.

### *11.3 What prevents hospitals from overcharging under this plan?*

Texas enforces clear and simple rules tied to participation in the state purchasing and transparency framework.

These include:

- cost-plus pricing limits
- standard billing formats
- upfront procedure prices
- penalties for deceptive or inflated charges
- public price disclosure

Hospitals remain private, but they must follow fair pricing rules.

### *11.4 Why would insurance companies oppose this?*

Some insurers will oppose it because it removes the tools they use to raise premiums.

This initiative:

- stops risk segmentation
- blocks zip-code-based price manipulation
- requires premium transparency
- demands real cost data
- prevents unjustified increases

Insurance companies lose the ability to inflate prices without proof.

### *11.5 How does the unified Texas risk standard work?*

The risk standard:

- sets one fair statewide calculation
- prevents insurers from dividing Texans into overpriced categories
- stops region-based price spikes
- stabilizes premiums for families and businesses
- uses real medical data, not statistical manipulation

All private insurance stays private.  
Texas simply enforces fair rules.

### *11.6 Does this replace private insurance?*

No.  
Texas does not create a state insurance plan.

Under this initiative:

- insurance companies still offer plans
- employers still choose coverage
- families still pick their provider
- the entire system stays private

Texas only steps in to stop price abuse.

### *11.7 How does this protect rural hospitals?*

Rural hospitals benefit immediately.

Protection includes:

- lower supply costs
- predictable reimbursements

- stable pricing for emergency and maternity care
- telehealth support
- emergency supply reserves
- improved financial margins

Stronger rural hospitals keep rural Texas alive.

### *11.8 Does this affect how doctors practice?*

No.

Doctors keep their independence.

The initiative:

- does not control clinical decisions
- does not change treatment rules
- does not interfere with medical judgment
- does not add new federal-style oversight

Doctors continue practicing medicine the same way they do today.

### *11.9 Who qualifies for lower costs?*

Every Texan benefits from:

- lower supply-driven hospital charges
- fairer billing
- reduced premiums over time



- stronger rural access
- more affordable emergency and maternity services

This is a statewide reform, not a selective program.

### *11.10 What is the timeline?*

The rollout happens in four phases, beginning with:

Texas begins with:

1. rural and high-cost regions
2. major hospital systems
3. unified risk standard enforcement
4. full transparency and billing reforms

Most Texans start feeling the effects within the first two phases.

### *11.11 How is this funded?*

Funding comes from:

- bulk purchasing savings
- cost-plus margins
- reduced emergency room costs
- avoided rural hospital closures
- redirected existing state healthcare spending

No new taxes are required.

### *11.12 How does this help childbirth costs?*

This initiative lowers childbirth costs by:

- reducing inflated supply expenses
- stabilizing delivery pricing
- strengthening rural maternity access
- creating predictable cost structures
- eliminating unfair markups

Texas families should not fear the price of bringing a child into the world.

### *11.13 Is this universal healthcare?*

No.

This initiative:

- keeps all care private
- keeps all insurance plans private
- does not create a state coverage program
- does not replace employer-based insurance

Texas regulates price fairness, not medical coverage.

### *11.14 Is hospital participation voluntary?*

Yes.

Hospitals choose to participate, but the savings make participation the smart choice.

Participation offers:

- lower supply costs
- predictable billing rules
- stabilized revenue
- better rural support
- access to emergency supply reserves

Hospitals gain more than they give.

### *11.15 How does this affect Texans with chronic conditions?*

Texans with chronic conditions benefit directly.

Benefits include:

- lower long-term care costs
- fewer surprise bills
- protection from risk-based premium spikes
- more affordable outpatient services
- stronger access in rural areas

Chronic-care patients are among the biggest winners in this system.

### *11.16 Is this legal under federal law?*

Yes. This initiative can be structured to operate within existing federal law. States already have authority to regulate insurance markets, manage supply chains, enforce price transparency, oversee hospital billing, and coordinate emergency medical systems. The details would be drafted with legal experts to make sure Texas stays within its powers while pushing for the strongest protections possible.

## SECTION 12 — CONCLUSION: A TEXAS-FIRST PATH FORWARD

Texas deserves a healthcare system that works for the people who live here, not for corporations, distributors, or insurance algorithms. This initiative builds a stronger future by lowering costs at the source, stabilizing hospitals, protecting families from inflated bills, and giving rural Texas the support it has been denied for years. The path forward is simple, practical, and rooted in Texas values.

### *12.1 Restating the Texas Mission*

This initiative is built on a clear mission:

- protect Texas families from inflated medical costs
- stabilize hospitals and clinics across the state
- keep healthcare private while enforcing fairness
- shield Texans from sudden premium spikes
- strengthen rural communities
- bring predictability back to healthcare

Texas fixes the parts of the system that Washington ignored.

### *12.2 Protecting Families and Strengthening Hospitals*

Lowering costs at the source creates stability for every part of the system.

This initiative:

- shields families from rising bills
- gives hospitals predictable operating expenses
- reduces financial strain on maternity and emergency services

- supports rural clinics
- slows premium growth and stabilizes premiums over time
- keeps ERs and trauma centers functioning reliably

Texans deserve a system that puts their needs first.

### *12.3 Respect for Working Texans and Rural Communities*

This initiative recognizes the people who keep the state running.

It supports:

- rural families who often travel hours for care
- workers who lose wages from avoidable medical debt
- small businesses struggling with insurance instability
- healthcare staff who face impossible financial pressures
- communities that depend on local hospitals for survival

A fair healthcare system honors the people who carry Texas forward.

## *12.4 Building a Stronger, Independent Texas Healthcare System*

Texas cannot afford to wait for federal systems to stabilize.

The state must protect itself from inflated pricing, federal swings, and corporate manipulation.

This initiative:

- creates a protected pricing structure
- builds emergency resilience
- strengthens statewide logistics
- secures rural access
- reinforces the Texas workforce
- saves families money year after year

Texas becomes more independent and far more stable when healthcare costs are predictable, fair, and controlled at the source.

## SECTION 13: FINAL MESSAGE FROM STEPHEN

Texas deserves a healthcare system built on honesty, fairness, and respect. For too long, Texans have been forced to navigate a system where the prices do not make sense, where bills arrive out of nowhere, and where families carry the burden of decisions made far outside our state. I have listened to parents, nurses, veterans, small business owners, and rural families. Their stories are different, but the frustration is the same. The system has not been working for them.

This initiative is my commitment to fix what has been ignored for years. We lower the cost of care at the source. We bring fairness back into the system. We protect our rural hospitals. We stop insurance companies from using Texas families as a shield for inflated prices. We take back control of the parts of healthcare that have driven people into debt, pushed hospitals to the edge, and put small communities at risk.

This reform strengthens everything else we are building for Texas. A stable healthcare system supports our workforce, reduces pressure on families, and gives young parents the confidence to build their futures here. It keeps rural communities alive and ensures that Texans get quality care close to home. It protects the people who keep this state strong. Nurses, first responders, teachers, veterans, and working families deserve stability and respect. A strong Texas needs a strong healthcare foundation, and this initiative provides it.

My promise is simple. I will fight for a fair, stable, and transparent healthcare system that works for the people of Texas, not for corporations. I will push back against anyone who profits from inflated prices or broken contracts. I will stand with the families and communities that keep this state moving forward. Texas was built by people who solve problems, protect their neighbors, and take care of their own. This plan continues that tradition.

We build this future together. A future where healthcare is affordable, rural hospitals stay open, and Texans can trust the system that is supposed to serve them. A future where our families are stronger, our communities are safer, and the state of Texas stands on its own feet, independent, stable, and ready for the next generation.