Framework Whitepaper

Tru-Medical Protection for America

Problem Statement

The U.S. healthcare coverage environment is fragmented across multiple eligibility systems, funding channels, and enrollment processes. This fragmentation increases cost, complexity, and instability for consumers.

Structural Distinction

Tru-Medical Protection distinguishes between medical care delivery and the financial mechanism used to pay for that care. This separation allows policy reform to address funding and access without collapsing all care into a single public system.

Funding and Market Delivery

The framework combines a universal identification structure with a predictable income-based contribution model and private carrier delivery. It aims to use what already exists - payroll systems, carrier participation, agent enrollment, and federal oversight - and align them more effectively.

Public Assistance Simplification

Rather than layering multiple subsidy categories, the proposal explores a simplified assistance structure modeled after the Medicare Savings Program.

Implementation Considerations

- Carrier participation and risk adjustment
- Federal and state oversight responsibilities
- Transition timing and budget scoring
- Consumer protections and plan standards

Conclusion

The proposal is designed as a practical reform framework. It is intended for further refinement through policy discussion, cost modeling, and legislative drafting.