

Health Care for All New York Campaign

Standards for Quality, Affordable for Health Care for All:

The Health Care for All New York (HCFANY) Campaign believes that every resident of New York State and the nation should have access to affordable and comprehensive health care.

Our current health care system is too often unworkable and unaffordable for our families, businesses or government. All of us--individuals, employers and policymakers--have a shared responsibility to reform our health care system. The HCFANY Campaign believes that the government has a unique obligation to guarantee affordable comprehensive health care for its people and that it must play a central role in reforming, regulating, financing, and providing health coverage for all residents of our State and country.

The HCFANY Campaign anticipates that proposed reform measures may include: a public health coverage plan, publicly-sponsored insurance plans, and private insurance. Whatever the forms of coverage our state and nation adopt, we believe that health care reform proposals will best realize the promise of quality, affordable health care for all, if a proposal meets the following *Standards for Universal Health Care*:

- ✓ **Everyone must have health coverage or access to health care.**
47 million Americans and 2.7 million New Yorkers are uninsured. We need a health care system that provides comprehensive and affordable health coverage—or affordable care when coverage is not available—that is open to all residents of our state, including immigrants.
- ✓ **Health coverage must be affordable to the family budget.**
Health care and insurance are unaffordable for families, individuals and businesses alike. The cost of health coverage should fit within a family budget and reflect the cost of living in our respective communities: People should be asked to pay on a progressive sliding scale, with lower-income families paying a smaller portion of their income than higher-income families. Health insurance deductibles and co-pays should be affordable.
- ✓ **Health coverage must include comprehensive benefits to meet peoples' needs.**
Too often, health insurance fails us when we really need it: when we get a serious or chronic health condition or disability. All health coverage should offer a comprehensive benefit package that covers what people need to keep healthy and treat illnesses, injuries and chronic conditions and disabilities. Everyone should get the kind of coverage that people get in a good employee or government health plans or that New Yorkers get now through Child Health and Family Health Plus. Coverage should include: parity for mental health, prescription drugs, dental, vision, comprehensive reproductive health care, rehabilitation and some long term care. Benefits should include preventative care, including health and nutrition education. If a policy doesn't cover something that's needed, like prescription drugs or treatment for mental health, the family will not receive the care, unless they can afford to pay for it. Capping or cutting a benefit doesn't save money – it just passes the cost on to the family.

- ✓ **Government should be an active watchdog and regulator of the health care system.** Far too often, insurers deny or delay necessary benefits or access to care, drop coverage inappropriately or raise premiums without effective government oversight. Government should regulate the insurance industry aggressively. Regulations should specifically include the following: create the largest possible groups so that costs are fairly shared by all; establish risk adjustment mechanisms that prevent undue concentrations of risk; retain and enforce rules that prevent insurers from turning people away, raising rates or dropping coverage based on health history or risk; and ensure that premiums are used for health care, not insurance company administration and excess profit, by regulating insurance loss-ratios and rates.
 - **Health coverage must include strong consumer protections.** The government should enact strong consumer protections to protect access to the most appropriate and highest levels of care and enable consumers to appeal denials of care. The government should also adopt rules that eliminate unnecessary bureaucracy and paper work and work to streamline and simplify the administration of health coverage.
 - **Consumer assistance programs must assure be created and funded to ensure that our universal coverage goals are realized.** Whenever new systems of health care are adopted, consumers routinely get lost when navigating the new rules and program options. As we adopt new programs for universal health coverage, we must assure that consumers are not left behind and are offered consumer assistance programs that help them effectively choose and use the new health care delivery system. Consumer assistance programs can also reflect the diverse nature and needs of our communities and assure that all people get the best care possible for themselves and their families.

- ✓ **Health coverage must promote equity in health care utilization and outcomes.** Our health care system is rife with unacceptable inequity based on income status, gender, race, age, immigration and linguistic status, sexual orientation, and health status. We believe that the government has a key role in striving to achieve equity for all who use and work in the health care system. Particularly, we urge the government to address the following:
 - **Health coverage must eliminate racial and ethnic disparities in health care.** People of color and immigrants are more likely to be uninsured, get sicker, receive poorer quality of care, and are more likely to die in our current health care system because of a lack of investment in access, treatment and research in people and communities of color. We must provide equity in health care coverage, access, treatment, research and resources to people and communities of color, resulting in real improvement in health outcomes and life expectancy. We must assure that our health care and coverage systems include appropriate interpretation and translation services for Limited English Proficient patients which will assure accuracy in health care outcomes and improve the overall cost-effectiveness of the system.

- **The health care system must reduce disparities in health care between people with serious illnesses and disabilities and those without.** People with disabilities face more difficulties in obtaining care than their non-disabled counterparts. They are often isolated in small risk pools in a segmented market and are segregated from the broader community for treatment. Children with disabilities have a higher unmet need for medical care when compared with the general pediatric population. Women with disabilities face barriers to health care that place them at greater risk of breast cancer and cervical cancer. These disparities affect the individuals, their families and all of society. Health care reform efforts must strive to eliminate gaps in coverage, remove of physical barriers, eradicate attitudinal barriers, and integrate the sick and disabled into larger risk pools and community based care.
- ✓ **Existing and new public health insurance programs must be administratively simple to ensure enrollment.** Seventy-percent of uninsured children and 40% of adults are already eligible for existing public health insurance programs, but are not insured. Complicated and onerous bureaucratic rules close the door to enrollment for thousands of New Yorkers. Streamlining and simplifying the enrollment and renewal pathways through the elimination of unnecessary procedures and documentation requirements will not only ease local districts' administrative burdens but will make it easier for individuals to gain access to public health insurance coverage.
- ✓ **Everyone should have the choice of a public health plan.** Our American health care system now has private insurance and public insurance. Private insurance companies have high administrative costs, deny and delay approving and paying for health care and look at their own bottom-lines rather than a patient's or the community's health. The government should provide all of us with the ability to get coverage from a public plan, provided directly by the state and not through private insurers, that is affordable, has comprehensive benefits and allows consumers to choose their own health care providers.
- ✓ **Health care reform should include effective cost controls that promote quality.** Health care costs are sky-rocketing, but we should not control them by depriving consumers of access to appropriate care. We can control costs without hurting quality. We can dramatically reduce costs for doctors and hospitals if all insurance plans use a standard form for claims. We can improve costs and raise quality with new health information systems and better treatment for chronic diseases. We can cut the cost of prescription drug in half if we use the government's purchasing power to achieve lower drug prices. We can reduce the amount of duplication and waste in the system if the public has a role in deciding where money is invested in health care.
- ✓ **Employers' health coverage costs should be predictable and proportional to their total labor costs.** Under our current system, employers are expected to provide coverage on a per employee basis. Health care costs are enormously higher as a portion of total labor costs for lower wage as opposed to higher wage workers. As a consequence, very few low wage workers get any health insurance coverage through their employers, and many low wage employers do not contribute at all to the health care system. The financing of universal health coverage should be progressive and broad-

based. To the extent that financing reform proposals maintain employer-sponsored insurance, all employers should contribute fairly, based on a percentage of employees' wages, just as they do now for retirement benefits under Social Security and Medicare. This would also make health care costs more predictable for employers.

- ✓ **The safety-net health care delivery system must be preserved and enhanced.**
Our health care delivery system relies on an overworked and thinly stretched network of safety-net providers that traditionally have served underserved low-income and uninsured individuals and communities. Government must ensure that publicly-subsidized health providers meet their mandate to provide affordable care without regard to patients' insurance status, ability to pay, race, age, gender, disability, or immigration status. This safety-net delivery system should be bolstered so that it can provide affordable, accessible and high quality primary and tertiary health care to all who do not benefit from our reforms, so as to further reduce inequity in the health care system.