

# HEALTH CARE FOR AMERICA **NOW!**

## Statement of Common Purpose

We believe that all of us benefit from healthy communities, where we all have access to affordable, quality health care from a provider of our choice, at the time we need it, at a cost we can afford. Our mutual goal is affordable, quality health care for everyone in America and for our nation.

Our current health care system in America is not affordable for families, businesses or government. We need an American solution to secure our families' health and a healthy economy. All of us, individuals, employers and government have a shared responsibility to realize comprehensive reforms in our health care system.

Our government's responsibility is to guarantee quality affordable health care for everyone in America and it must play a central role in regulating, financing, and providing health coverage by establishing:

- A truly inclusive and accessible health care system in which no one is left out.
- A choice of a private insurance plan, including keeping the insurance you have if you like it, or a public insurance plan without a private insurer middleman that guarantees affordable coverage.
- A standard for health benefits that covers what people need to keep healthy and to be treated when they are ill. Health care benefits should cover all necessary care including preventative services and treatment needed by those with serious and chronic diseases and conditions.
- Health care coverage with out-of-pocket costs including premiums, co-pays and deductibles that are based on a family's ability to pay for health care and without limits on payments for covered services
- Equity in health care access, treatment, research and resources to people and communities of color, resulting in the elimination of racial disparities in health outcomes and real improvement in health and life expectancy for all.
- Health coverage through the largest possible pools in order to achieve affordable, quality coverage for the entire population and to share risk fairly.
- A watchdog role on all plans, to assure that risk is fairly spread among all health care payers and that insurers do not turn people away, raise rates or drop coverage based on a person's health history or wrongly delay or deny care.
- A choice of doctors, health providers and public and private plans, without gaps in coverage or access and a delivery system that meets the needs of at-risk populations.
- Affordable and predictable health costs to businesses and employers. To the extent that employers contribute to the cost of health coverage, those payments should be related to employee wages rather than on a per-employee basis.
- Effective cost controls that promote quality, lower administrative costs and long term financial sustainability, including: standard claims forms, secure electronic medical records, using the public's purchasing power to instill greater reliance on evidence-based protocols and lower drug and device prices, better management and treatment of chronic diseases and a public role in deciding where money is invested in health care.

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