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AGENDA FOR HEALTH REFORM

The Public Plan

1. **All individuals and families should be eligible for the public plan, regardless of income.**

2. **The public plan must be affordable to consumers.** Affordability means the costs to consumers including any premium, copayments, or out of pocket costs are reasonable.

3. **The public plan should serve as a model that shifts the emphasis of health systems from acute medical care toward prevention and wellness by:**
 - ◆ Enhanced provider payments for prevention and early intervention
 - ◆ First dollar coverage of clinical preventive health services
 - ◆ Moving to outcome based reimbursement payments
 - ◆ Requiring the use of health information technology (IT)
 - ◆ Requiring linkage to the nation's public health system
 - ◆ Using proven population based strategies at the provider, health plan and community level

4. **Coverage should at a minimum use the actuarial equivalent of the Federal Employees Health Benefit Plan standard option benefit package and should include the following public health services:**
 - ◆ Evidence-based clinical preventive services
 - ◆ Behavioral health services
 - ◆ Dental & vision care
 - ◆ Reproductive health services
 - ◆ Disease management

5. **The public plan should ensure the inclusion of the current network of safety net providers.**

6. **The public plan's practices and policies should serve as a model for affordability for other health plans within the existing health system.** This should be reflected in setting provider payments, which should also be adequate enough to ensure patient access to providers. The plan must be organized and governed to be administratively efficient, keeping administrative costs low consistent with other public programs.