

Public Health Agenda: The Next 100 Days

PUBLIC HEALTH TESTIMONY AND CONGRESSIONAL VISITS TO SUPPORT:

- Enact universal coverage for quality, affordable, publicly accountable health care
- Advocate for single payer: State option. Testimony. Vote in Congress
- Improve and expand publicly-financed, publicly administered health programs
 - Medicare to cover under 25, over 50
 - Strong public plan option: Vote by majority in Congress
- Improve population health
- Address women's health concerns

VICTORIES Achieved and in Progress: First 100 Days

Achieved	In Progress
Halt the erosion of traditional, public Medicare	
 ✓ Cancel the 2010 Medicare Comparative Cost Adjustment demonstration. (Canceled by Congress) ✓ Eliminate the arbitrary 45% cap on general revenue funding for Medicare. (Waived until 2011) 	Stop excess payments to Medicare Advantage Plans. (Budget)
Children	Improve access to affordable medications
✓ Reauthorize SCHIP (Reauthorized by Congress)	 Create a public prescription drug benefit within traditional Medicare, requiring CMS to negotiate drug prices. – S. 330/HR 684 Allow the re-importation of prescription
Build a basis for effective. efficien	drugs. (Budget, legislation) t financing and delivery of health care
✓ Investigate the effectiveness, efficiency, and	
discriminatory practices in the health insurance industry. (HR 1)	Strengthen primary care capacity, improve care for veterans. (Budget)
 Compare effectiveness of medical treatments and implement best practices. (HR 1) 	

Improve the health of the nation. The Obama budget recognizes the elements of a long-term program to address the range of social and economic policies that can make people sick, or contribute to health. It invests in reducing income inequality and education, as well as universal health coverage. Our long-range goals remain:

- Link action across government sectors (employment, housing, education, environment, commerce and trade, health)
- to address the social and economic conditions and policies that make people sick and produce health inequities: economic deprivation, discrimination, and adverse conditions at work, in the environment, and in communities. Make improving health and reducing health inequities a criterion for all government initiatives.
- Safety-net institutions: Increase funding for public hospitals, and for community and migrant health centers. (Budget)

Join the listserv – send a blank message to: join-equal@list.equalhealth.info

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