

**Health Care Reform Principles for Safety Net Health Plans from  
Children's Mercy Family Health Partners and  
The Association for Community Affiliated Plans**

**Preamble: Health Care for All, Good Health for All**

Discussions about health care reform in the United States almost invariably focus on the uninsured and expansion of health insurance coverage. The ultimate goal of any health care reform, however, should be *good health for all people* brought about by *access to quality health care services for everyone*. Availability of good care – and movement toward good health – are a matter of justice and equity. In 2009 the United States is poised to make progress toward both.

The Association for Community Affiliated Plans (ACAP), of which Children's Mercy Family Health Partners is a member, comprises 40 not-for-profit safety net health plans that serve over 5.6 million individuals in public coverage programs such as Medicaid and SCHIP. These health plans have developed expertise in delivering quality health care services to historically underserved populations, including low-income individuals, the disabled, and others. While the *function* of safety net health plans is to provide public insurance to these individuals, the *aim* of safety net health plans is to provide coordinated access to good health care for the purpose of creating and maintaining good health. While good coverage means that no one forgoes needed health care due to an inability to pay, good health means the absence of unnecessary illness, disability, and premature death for lack of access to care.

Ensuring that all people in the United States receive good health care leading to better health could be greatly aided by simplifying the current health care system, which to many is overwhelmingly complex, difficult to navigate, expensive and riddled with cracks into which individuals fall all too often. Structural reform, beginning with simplifying and streamlining the system, is required to improve access, coverage and financing while improving quality and reducing costs.

It is noteworthy that expenditures on health care in the United States greatly exceed such expenditures in all other developed nations, but that this level of spending has not yet led to better health status, and that substantial disparities persist for low-income and minority populations. As this nation pushes forward on health care reform, we must also improve our standing in health outcomes compared to other developed nations, simultaneously ensuring that these improvements are equitably distributed among all segments of our population.

While the cornerstone of ACAP's Health Care Reform Principles is expanding coverage based on a successful model presented by safety net health plans and public coverage programs, ACAP promotes this coverage as a meaningful step toward providing coordinated and quality health care to all people. Quoting from the final report of the Institute of Medicine's Committee on the Consequences of Uninsurance called *Insuring American's Health*, "Health care coverage should enhance health and well-being by promoting access to high-quality care that is effective, efficient, safe, timely, patient-centered, and equitable."

## Medicaid Managed Care: Backbone for Expansions to Low-Income Uninsured Populations

### Health Care Reform Principles for Safety Net Health Plans

ACAP is dedicated to strengthening not-for-profit, safety net health plans as they work to improve the health and well-being of vulnerable populations. ACAP supports immediate movement toward **universal and continuous health coverage that provides coordinated systems of accessible, high-quality health care for all individuals**, regardless of socioeconomic status, race and ethnicity, individual or family health status, or employment status. This nationwide system should:

- Provide **universal and continuous health coverage** for all needed health care services through a multi-payer system building on the participation of *safety net health plans* with funding and oversight from appropriate government and private entities. This coverage should (a) build on and strengthen existing public programs such as Medicaid and SCHIP to take advantage of those programs' cost-effectiveness and efficiencies, and (b) utilize the historical experience of safety net health plans, particularly recognizing the ability of those health plans to meet the unique needs of low-income and uninsured populations.
- Guarantee that this system of health care delivers fully **accessible and coordinated care** from providers through health plans and is sufficiently funded to ensure that these health plans are able to maintain adequate networks of providers, thereby ensuring access to health care services including continuity of patient-centered primary and preventive care services; ensure that health care services are appropriately coordinated so that appropriate access is assured; and ensure that efforts to place requirements on individuals (including individual coverage mandates, cost sharing, or benefits limits) do not jeopardize the affordability of and access to health care services under the coverage.
- Through the use of coordinated care plans' data collection, transparent quality measurement systems using standardized measures such as HEDIS, monitoring, and management systems, promote acceptable **standards of quality** and establish benchmarks for constant improvements in access, clinical and organizational best practices, integration of services, prevention and early detection, and system-wide savings;
- Seek system-wide savings and improved **efficiency** through appropriate coordination of high-quality health care services, as well as the dissemination and widespread use of health information technology that can communicate across systems, including the use of electronic health records and electronic prescribing, and ensure that the system is able to sustain advancements in this technology; and
- Ensure that the **stewardship** of the nationwide coverage system be fairly borne by all elements of government and society, including safety net health plans and other health plans, Federal, state, and local governments, health care providers, corporations and the business community, and individuals.

In conclusion, ACAP and Children's Mercy Family Health Partners stresses that health reform proposals should build on the strengths of our system of public programs by using the delivery platforms already in existence— specifically, that provided by safety net health plans. Such entities are well-positioned to ensure that the principles listed above are executed, due to their long and committed experience to coverage and health care for all people.