

# Panel: New Revenues Needed for Universal Care

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Affordable health care coverage should be public policy established in law with a set of core benefits available to all Americans by 2012, the Citizens' Health Care Working Group said in its interim recommendations.

Benefits would be defined by an independent, nonpartisan, public-private group and cover physical, mental, and dental health services, the panel recommended.

The working group was established by the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 to foster national debate on health services availability and financing. The final recommendations, expected early next year, will be sent to Congress and the White House for debate and consideration.

In developing its recommendations, the 14-member panel held public meetings throughout the country, conducted polls, and read nearly 5,000 individual commentaries.

New revenues would be required for the coverage, with the group suggesting use of dedicated revenue streams including enrollee contributions, income taxes or surcharges, "sin taxes," payroll taxes, and value-added taxes.

"The opinion polls we examined, the community meetings we held, and the Web-based survey and comments we receive all showed large majorities of people willing to make additional financial investments in the service of expanding the protection against the costs of illness and the expansion of access to quality care," the working group said in its report.

Paul B. Ginsburg, president of the Cen-

ter for Studying Health System Change, praised the panel for pointing out that universal health coverage would require new revenues. "That's a reality check that almost no public leader is willing to admit because they always tells us you can do it for nothing."

He added that although Congress and the administration are not in the mood for another major health care expansion, the recommendations could act as a "motivational paper" to alert lawmakers to the public's values.

The working group also recommended greater federal support of integrated community health networks through establishment of a specific unit with responsibility for coordinating all federal efforts regarding the health care safety net.

Efforts to improve quality and efficiency of care should be strengthened by the

federal government through use of existing public health care programs and promotion of health information technology and electronic medical records, especially in underserved areas, the working group's report said.

The report also suggested that end-of-life services financing and provisions should be restructured "so that people living with advanced incurable conditions have increased access to these services in the environment they choose."

Working group members represent consumers, the uninsured, benefits financing, business, labor, and health care providers. It is chaired by Randall L. Johnson, director of human resource strategies for Motorola. The legislative provision that created the working group was sponsored by Senator Orrin Hatch (R-Utah) and Senator Ron Wyden (D-Ore.). ■

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