



Health Policy Stakeholder Meeting Template

In order to accurately capture and understand your organization's priorities for health care reform and other health care policy issues, we ask that you briefly detail your priorities as follows:

The National Business Group on Health is grateful for the opportunity to offer our comments and suggestions to the transition team during this historic moment and during these extraordinary economic times and appreciates that President-elect Obama has made health reform a priority issue for his upcoming Administration. The National Business Group on Health looks forward to continuing to work with the Administration on this important priority. In the interest of brevity, attached is a link to the National Business Group on Health's position on national health reform and the imperative for reform from the large employer perspective:

http://www.businessgrouphealth.org/benefitstopics/et_healthcarereform.cfm

We also plan to provide hard copies during our meeting.

- Health policy priorities/goals in the short term
Assuming that the time frame refers to the first few months of 2009, the National Business Group on Health believes that the following issues should be immediate priorities for the Obama Administration and Congress:
- Health Information Technology—Set interoperability standards and a timetable for achieving them; provide significant federal funding for providers, particularly small physician groups that do not have the financial means, to effectively implement health information technology and electronic medical records; and assure that privacy and security standards for personal health information do not go beyond HIPAA and do not inhibit the potential quality improvement and efficiency benefits of health information technology.
- Generic Biologics—Support FDA authority to create meaningful fast track approval for generic specialty pharmacy, or biologic products, including interchangeability.
- Price and Quality Transparency—Require Medicare to release provider-level claims data to the public; continue to support and speed up efforts to create national standards for quality, efficiency, and patient satisfaction measures through existing consensus processes of stakeholder groups; continue efforts to make more transparent financial incentives from suppliers to providers and potential provider conflicts of interest.
- Patient Safety—Continue CMS efforts to expand the Hospital-Acquired Conditions (HAC) initiative that is moving Medicare toward being a wise purchaser that pays for quality and safety not quantity; Support, through sufficient funding and technical resources, the efforts of the Agency for Health Care Research and Quality (AHRQ) to implement the Patient Safety Act of 2005,



- which will allow health care professionals to report preventable medical errors and near misses to Patient Safety Organizations without fear of recriminations so that the health care system can learn from mistakes and make systemic changes to improve patient safety and health care quality. There is a huge amount of waste, harm and lost productivity due to the failure to protect the American people from avoidable, serious adverse events. Productivity savings would help offset some of the other losses in our society.
- Primary Care—Support current medical home demonstration projects to encourage evaluation of the results to determine the effectiveness of this model of care. Also, align with MedPAC recommendations to redistribute Medicare payments toward primary care through a budget-neutral fee schedule increase (funded through reductions in overused procedures and services identified by the National Priorities Partnership); gradually moving to payment that incentivizes effective and efficient primary care.
 - Wellness—Support efforts to remove the tax penalty on employees for the value of employer contributions toward employee wellness activities. Currently, these contributions are not excluded from employee income if they are to maintain health and wellness and prevent illness or chronic conditions rather than for medical treatment.
 - Health policy priorities/goals in the long term
 - Comparative Effectiveness Research—Create a public-private entity, governed by a leadership board representing key stakeholders, with sufficient federal funding to conduct independent research (immune from political and budgetary influences) and disseminate objective information on the relative clinical effectiveness of new and existing medical interventions.
 - Medicare Payment Reform/Pay-for-Performance—Decisively move Medicare away from the current pricing and payment system based largely on volume to payment based on performance where payment is driven by medical evidence, not political influence, that rewards providers based on effectiveness and efficiency. Use payment policy changes to reduce excessive, expensive, unsafe imaging.
 - Medical Liability Reform—Providers and facilities that practice evidence-based medicine reflecting current research and best practices should be immune from lawsuit while patients maintain rights for quick redress in cases of malpractice.
 - Health Care Reform—The link above to our position on health reform provides more details on the large employer perspective on health reform. Briefly:



- We need to address cost, quality, safety and access challenges simultaneously to assure that any expansion in access is sustainable and affordable in the long-term. Many of the recommendations we suggest above would help to assure long-term access to affordable, effective, and efficient health care and coverage.
 - We should maintain the current favorable tax treatment for employer-sponsored coverage and level the playing field for individually-purchased insurance.
 - Governments should not mandate that employers either offer coverage or pay the government. These actions are counterproductive as they will raise the number of unemployed and uninsured.
 - Support the federal framework of ERISA and oppose waivers for state health reform. ERISA promotes the ability to offer affordable, comprehensive, and innovative coverage efficiently for the majority of Americans with private coverage.
 - Every adult that is able to afford coverage should be required to have it for themselves and their dependent children. People should have access to a range of coverage choices through multiple sources. Coverage must promote efficiency by including best management practices. Any enforcement mechanism for an individual health insurance requirement should be at the national level.
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- The mechanisms for achieving the goal (i.e., executive order, regulation, guidelines, policy change or legislation)
 - Please refer to the above

 - Any budgetary or appropriations concerns or impact
 - Please refer to the above.

 - Any other HHS related issue