



Partnership to Protect Coverage (PPC) Consensus Healthcare Reform Principles

Today, millions of individuals, including many with preexisting health conditions, can obtain affordable health care coverage. Any changes to current law should preserve coverage for these individuals, extend coverage to those who remain uninsured, and lower costs and improve quality for all. This is particularly important for populations that have been marginalized or underserved based on their race, ethnicity, geography, gender identity, sexual orientation, disability status, country of origin, and socioeconomic status.

In addition, any reform measure must support a health care system that addresses persisting inequities, provides affordable, accessible and adequate health care coverage to all, and preserves the coverage provided to millions through Medicare and Medicaid. The basic elements of meaningful coverage are described below.

Health Insurance Must be Affordable – Affordable plans ensure patients have equitable access to needed care in a timely manner from an experienced provider without undue financial burden. Affordable coverage includes reasonable premiums and cost sharing (such as deductibles, copays and coinsurance) and limits on out-of-pocket expenses. Adequate financial assistance must be available for people with low incomes and individuals with preexisting conditions should not be subject to increased premium costs based on their disease or health status.

Health Insurance Must be Accessible – All people, regardless of socioeconomic status, should be able to gain coverage without waiting periods through adequate open and special enrollment periods. Patient protections in current law should be retained, including prohibitions on preexisting condition exclusions, annual and lifetime limits, insurance policy rescissions, gender pricing and excessive premiums for older adults. Children should be allowed to remain on their parents' health plans until age 26 and coverage through Medicare and Medicaid should not be jeopardized through excessive cost-shifting, funding cuts, or per capita caps or block granting.

Health Insurance Must be Adequate and Understandable – All plans should be required to cover a full range of needed health benefits with a comprehensive and stable network of providers and plan features. Guaranteed access to and prioritization of preventive services without cost-sharing should be preserved. Information regarding costs and coverage must be available, transparent, and understandable to the consumer in a culturally competent manner prior to purchasing the plan.

ALS Association

American Cancer Society Cancer Action Network

American Diabetes Association

American Heart Association

American Kidney Fund

American Liver Foundation

American Lung Association

Arthritis Foundation

Asthma and Allergy Foundation

Autism Speaks

Cancer Support Community

CancerCare

Chronic Disease Coalition

Crohn's & Colitis Foundation

Cystic Fibrosis Foundation

Epilepsy Foundation

Family Voices

Hemophilia Federation of America

Immune Deficiency Foundation

JDRF

Lupus Foundation of America

Lutheran Services in America

March of Dimes

Mended Little Hearts

Muscular Dystrophy Association

National Alliance on Mental Illness

National Coalition for Cancer Survivorship

National Eczema Association

National Health Council

National Hemophilia Foundation

National Kidney Foundation

National Multiple Sclerosis Society

National Organization for Rare Disorders

National Patient Advocate Foundation

National Psoriasis Foundation

Pulmonary Hypertension Association

Susan G. Komen

The AIDS Institute

The Leukemia & Lymphoma Society

United Way Worldwide

Volunteers of America

WomenHeart: The National Coalition for

Women with Heart Disease