

May 2, 2009/modified May 5, 2009

To: Executive Board
American Public Health Association

Re: The American Public Health Association's Position on Health Reform

The United States has reached another historical crossroad in the debate over health care, as we have several times in the last 100 years. The issue is a high priority for President Obama. Forty-seven million people are without health insurance, and millions more cannot afford health care. Health care costs are 15% of the GDP. The U.S. ranks 37th in the world on population health outcomes, and public health systems are seriously underfunded. The American Public Health Association has a timely opportunity to represent the reforms that we have long advocated for.

APHA policy has consistently advocated for universal coverage under a publicly financed system. This position was most recently stated in the APHA Agenda for Health Reform (2009). In 1993 the Governing Council clarified that APHA supported single payer legislation.

There is growing support in Congress for building on publicly financed programs like Medicare that can control costs and expand coverage. Alternatives, that expand subsidies to the private for-profit health insurance industry, have repeatedly failed at the state level.

Recently APHA made the decision to ally with the Health Reform Dialogues (HRD) coalition, which includes the pharmaceutical and health insurance industries, as well as Families USA. The statement issued by the HRD group in March sidestepped the issue, of whether individuals or employers should be required to buy or offer coverage, and whether a government-run health plan should be available to compete with private companies. The HRD group's statement seems to oppose public financing for universal coverage and refers to public health coverage programs only for the sickest and poorest, and this seems in conflict with the APHA position. Hence, the two participating labor groups have withdrawn from HRD.

While it may have been useful to explore this coalition as a venue for voicing APHA's disease prevention and health promotion goals, APHA's continued participation gives credibility to HRD's central positions on financing and coverage, and seems to trivialize the public financing option.

We believe that while it is important to engage in dialogue with groups representing diverse positions on health reform, it is imperative that APHA officials and staff take specific actions to align APHA with those organizations, legislators, Administration officials and others who are promoting publicly sponsored, universal health insurance coverage

We therefore ask that APHA reconsider continued participation in HRD.

We further urge APHA to refocus on seeking and joining organizations active on the issues identified by the House Progressive Caucus: assuring single payer testimony at Congressional hearings; including a single payer option for states; and advocating for a strong public plan option that is designed to maximize enrollment, affordability, cost control and quality of care.

The CHPPD Section members are interested in working with APHA to talk a pro-active stance on health reform going forward, and with involving members in advocacy for universal health care.

Signed:

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