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Congressional Progressive Caucus

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82 Strong and Growing: Open to New and Different Ideas

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CPC RELEASES HEALTH CARE REFORM PRINCIPLES

WASHINGTON, DC-- The 82- member Congressional Progressive Caucus (CPC), the largest caucus in Congress, issued a strongly worded position Friday on health care reform legislation.

In separate letters, the caucus also requested meetings with President Obama and Speaker Pelosi to discuss the principles they expect to be included in the health care reform bill conference report.

The CPC statement of principles, released by co-chairs Rep. Lynn Woolsey (D-Calif.) and Raúl M. Grijalva (D-Ariz.), follows:

Congressional Progressive Caucus

Principles for the Health Care Reform Bill Conference Report

Members of the Congressional Progressive Caucus applaud Speaker Pelosi and members of leadership for passing a health care reform bill in the House that protects vulnerable Americans and improves the quality and efficiency of our health care delivery system. The House bill includes many positive elements: closing the Medicare Part D doughnut hole; addressing racial and ethnic minority health disparities; allowing immigrants to purchase health insurance; language to ensure fairer treatment of the U.S. Territories by bolstering Medicaid parity and expanding access to the Health Exchange; and adequately funding community health centers and DSH hospitals. Just as importantly, the House funding mechanism follows President Obama's commitment not to raise taxes on those families making under \$250,000 or to penalize workers by taxing health plans. These provisions must be preserved in a final bill.

The House bill can be improved in several ways. We continue to support the inclusion of a provision that will allow each state to offer its own single-payer plan; such a measure was not included in the House bill. On the other hand, the Stupak-Pitts amendment unfairly restricting reproductive coverage must be excluded from any final bill.

We are also very concerned that the overall strength of the House bill will be damaged by proposed changes in the Senate. Any final bill must assure the following:

• The creation of a nation-wide public option, such as the one in the House bill that increases competition, affordability and access for all Americans.

- Health insurance that is affordable for everyone. The Senate should not decrease the cost of the bill at the expense of affordability for the consumer. Any changes the Senate makes to decrease the costs of the bill should not be at the expense of affordability credits or subsidies. We should not be held to an arbitrary cap of \$900 billion. We must protect lower and middle income Americans by:
 - Ensuring that necessary subsidies are provided to everyone who needs them. The House subsidies for those under 250% of the Federal Poverty Line and Senate subsidies for those above 250% of the Federal Poverty Line are the best approach to achieving this goal.
 - Expanding Medicaid to 150% of federal poverty level
 - Increasing payments to primary care providers under Medicaid.
- Insurance market regulations to keep premiums reasonable and end abusive practices. Those provisions include:
 - Prior justification, disclosure and review of premium increases, as in the House bill.
 - Repeal of the health insurance industry exemption from antitrust laws.
 - FTC review.
 - Minimum percentage of premium dollars that must be spent on medical care should be at least as high as the House bill.
 - Prohibitions on Exchange participation by insurers that act irresponsibility.
- The employer insurance provision mandate in the House reform bill.
- Comprehensive services for children, including preventive services, EPSDT, mental health and substance abuse provisions, and administrative simplification of the enrollment process.