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AARP California Health Care Reform Principles

Senate Health Care Committee Hearing

February 25, 2009

Madam Chair person and members of the Senate Health Committee, my name is Peter Martineau and I work as an Advocacy volunteer for AARP. And, I am pleased to be here on behalf of AARP's 3.4 million members in California. We have been working for a number of years with you, the Governor, and your colleagues in the Assembly to bring comprehensive health care reform to California. An increasing number of Californians are finding health care to be un-affordable and in-accessible. Many of our 50 to 64 year old members find that getting health insurance is either too expensive or impossible. The recession we are all experiencing is making things worse as we see more and more health care-related bankruptcies and more and more people using emergency rooms.

We are glad you are holding this hearing today and we look forward to working with you to make health care reform a reality in California.

AARP has set forth a set of principles on Health Care Reform and we would like to line those out for you now:

- 1. All Californians have a right to affordable, high-quality health care services when they need them.** All individuals should have public or private health coverage. The state should establish a minimum, adequate, defined package of benefits to which all individuals are entitled.

2. Financing of health care should be broad-based and equitable.

Employers, individuals, and government should share the responsibility of participating in health care financing. The public, through federal and state governments, should subsidize the cost of health care coverage for low-income individuals, and should fully finance health care coverage for the poor.

3. Costs should be contained through more rational and efficient delivery of health care.

Significant cost savings can be achieved by advancing information technology, greater transparency (consumer access to information on health care quality and costs), evidence-based practices, chronic care coordination, and disease management and prevention.

4. Individuals should take personal responsibility for their health by educating themselves and taking appropriate preventive measures.

Incentives to promote healthy behaviors should be encouraged, as long as they do not deny access to health care.

5. Long-term care services should be coordinated and integrated to ensure a continuum of care throughout a person's lifetime.

The state should ensure that persons with chronic conditions or disabilities have access to ongoing, long-term care in order to help them remain active and independent. Better coordination and integration of services would result in cost savings by reducing the need for acute-care hospitalization and institutionalization.

Again, thank you for holding this hearing today and we look forward to working with you in the future on this very important issue.

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