

Securing Our Healthy Future

A Road Map for the 117th
Congress to Improve Health
and Health Care in Every
American Community



The 117th Congress is convening at a pivotal moment in the history of our nation. We face a significant set of challenges, but also a momentous opportunity to greatly improve the lives of struggling families in America.

Families USA is a national, nonpartisan voice for health care consumers dedicated to achieving our vision of a nation where everyone has access to the best health and health care. Our work centers on key policy pillars essential to that goal: health care value, health equity, and health coverage. All of our work is through the lens of consumer experience, elevating the voice and priorities of families in local, state, and national efforts to shape our health care system. We always keep front and center the needs of historically marginalized and disadvantaged people, including people with low incomes; people of color; immigrants; people with disabilities; and children.

The greatness of a nation can be measured by how it handles adversity. The novel coronavirus COVID-19

not only exposed the problems with our health care system but also gave us a blueprint for change. Policymakers have a unique imperative to respond to the devastating health and financial crises triggered by the COVID-19 pandemic by addressing immediate needs while also building a more equitable, efficient, and effective health care system for the future.

Families USA stands ready to serve as a key partner in this essential work and urges every member of Congress to join us in developing policy solutions that draw upon the strength of American innovation, celebrate the diversity of the American people, and finally construct a health care system that truly serves every community. To achieve that goal, Congress must:



COVID-19 RELIEF

Take bold and immediate action to stop the spread of COVID-19, save lives, and restore our economy.



HEALTH COVERAGE

Ensure every person in America has comprehensive health coverage that ensures affordable access to high-quality health care.



HEALTH EQUITY

End racial injustice in health and health care, and ensure all individuals and families have equal opportunity to live a healthy life, free from health disparities and barriers to care because of who they are, where they come from, where they live, what language they speak, or how they identify.



HEALTH CARE VALUE

Guarantee high-quality, low-cost, consumer-centered health care by bringing down health care costs, curbing industry abuses, and transforming the health care system to prioritize delivering value and improving people's health.



CONSUMER EXPERIENCE

Make certain that policy changes are informed by consumer experiences and that the best interests of patients and families are at the heart of every policy solution.



COVID-19 RELIEF



TAKE BOLD AND IMMEDIATE ACTION TO STOP THE SPREAD OF COVID-19, SAVE LIVES, AND RESTORE OUR ECONOMY.

In 2020, Congress made a handful of key investments in responding to the pandemic, but ultimately fell short of meeting the enormous and dire needs of communities across the country. Congress must now move quickly to pass comprehensive relief that includes provisions to:

- » **Equip states, territories, and localities with sufficient financial support to combat the crisis and appropriately manage budget shortfalls driven by the economic downturn.**
- » **Stem the tide of massive health coverage losses resulting from the pandemic-induced economic downturn by:**
 - › Lowering the cost of health care for people who purchase Marketplace plans in two key ways:
 - Expanding and increasing the value of advanced premium tax credits (APTCs) to reduce or eliminate health insurance premiums, ensuring no one pays more than 8.5 percent of their income for coverage.

- Providing maximal APTCs to unemployment insurance (UI) recipients for the length of the public health and economic crisis.

- › Enacting 100% premium subsidies for Consolidated Omnibus Budget Reconciliation Act (COBRA) continuation health coverage subsidies for people who lost their jobs during the crisis.
- › Allowing Medicaid to cover care related to COVID-19 for uninsured individuals in need of treatment.
- › Providing at least \$600 million for intensive consumer assistance, including dedicated staff and application assistance, that builds upon the existing navigator program to help laid-off workers and their families obtain health coverage.

» **Strengthen the Medicaid program to support states and further protect individuals and families who are losing jobs and private health coverage from losing their access to health care by:**

- › Extending an enhanced Medicaid federal medical assistance percentage (FMAP) rate for the length of the economic downturn —

ideally no less than 14% — alongside a robust maintenance of effort (MOE) requirement that ensures families who rely on Medicaid for their health care can keep their coverage and benefits.

- › Creating a countercyclical FMAP payment mechanism that automatically increases federal contributions when state economic conditions decline and both workers and the economy need extra help.

» **Shore up America's public health infrastructure by:**

- › Bolstering the Centers for Disease Control and Prevention (CDC) and investing in far-reaching and equitable access to testing, contact tracing, and vaccination, including mandatory coverage of testing and approved vaccines without cost sharing in all markets and systems.
- › Investing in our public health workforce while building long-term public health capacity within communities by recruiting, training, and employing community members in a workforce to assist with COVID-19 tracing, testing, and vaccinations, as well as enrolling people who have lost insurance in coverage.

For an in-depth look at policy recommendations critical to COVID-19 relief, please visit:

» [Families USA COVID-19 Resources](#)

» [Impact of COVID-19 on Coverage](#)

» [COVID-19 and Health Equity: "The Fierce Urgency of Now"](#)

» [History of Enhanced FMAP](#)



HEALTH COVERAGE



ENSURE EVERY PERSON IN AMERICA HAS COMPREHENSIVE HEALTH COVERAGE THAT ENSURES AFFORDABLE ACCESS TO HIGH-QUALITY HEALTH CARE.

Our health should not depend on our wealth. All children, all families, all individuals in this country should have access to high-quality, affordable health care and shouldn't face financial ruin if they need care. Comprehensive coverage is a fundamental building block upon which many other health interventions depend, and that coverage does two essential things: helps people obtain the care they need to lead healthy lives and protects against the often crushing financial burdens of uncovered medical expenses. Congress can strengthen the fabric of our nation's health coverage by passing legislation to:

» **Improve consumer choice by giving everyone the option to select publicly available coverage, like Medicare, that provides affordable, comprehensive, and high-quality care outside the control of private insurance companies, and by lowering the age of Medicare eligibility.**

» **Make health coverage and health care more accessible and affordable for *all families* by:**

- › Ensuring existing coverage options are available at minimal cost to people with limited financial resources by:
 - Substantially increasing financial assistance that helps people buy private coverage through health insurance marketplaces, especially for low-income families, low-wage workers, younger adults, and people caught

in the “family glitch” that denies federal assistance to families who cannot afford job-based coverage.

- Eliminating cost sharing within the Children's Health Insurance Program (CHIP) and Medicaid for children and pregnant people.
 - Reining in the marketing and sale of short-term, limited-duration, and other “junk” plans.
 - Giving states new options to move towards universal coverage through private insurance waivers.
- › Supporting individuals and families who have health coverage in accessing the services that are available to them by:
- Guaranteeing robust funding for consumer assistance programs that sign up consumers for coverage and help families trouble-shoot insurance problems as they emerge.

- Increasing funding for language access services.
- Providing sufficient Medicare and Medicaid reimbursement for telehealth services, particularly in rural and underserved areas.

» **Close existing coverage gaps and reinforce the health care safety net by:**

- › Streamlining and, whenever possible, automating enrollment of uninsured consumers into coverage during tax-filing season, using data from tax returns to guarantee a minimum level of continuous assistance through all insurance affordability programs.
- › Streamlining Medicaid and CHIP coverage for children and postpartum parents by:
 - Extending full Medicaid coverage for pregnant people to 12 months postpartum.
 - Automatically enrolling newborns in Medicaid and CHIP.
 - Ensuring continuous eligibility for all kids from birth to age 5.
 - Permanently authorizing and guaranteeing funding for CHIP.
 - Permanently authorizing Express Lane Eligibility (ELE) so states can quickly and easily determine and renew eligibility. To maximize these benefits, Congress should extend ELE to adults, make it easier for states to fully automate enrollment, and make it a requirement rather than a state option.

- › Ensuring seamless coverage for at-risk people making significant life transitions by:

- Eliminating the five-year waiting period for lawfully present immigrants to enroll in Medicaid and CHIP.
- Reactivating Medicaid for individuals involved with the criminal justice system prior to their release from incarceration.

- › Bolstering the Medicaid program by:

- Strengthening and extending financial incentives for states to implement and maintain Medicaid expansion, while ensuring that people living in nonexpansion states have access to affordable marketplace coverage via financial assistance or a public coverage option.
- Restructuring Medicaid financing for the U.S. territories, including Puerto Rico, to ensure stability on par with the states.

» **Ensure health coverage leads to meaningful, comprehensive, and integrated care by:**

- › Requiring adult dental services to be covered in both Medicare and Medicaid.
- › Covering a full range of reproductive health and family planning services delivered by the qualified provider of an individual's choice.
- › Increasing funding for home- and community-based services, including an immediate 10% Medicaid FMAP bump, as part of comprehensive reform of long-term care supports and services.

For an in-depth look at policy recommendations to improve health coverage, please visit:

» [Recent Medicaid Enrollment Trends](#)

» [Families USA Medicaid Work](#)

» [National Center for Coverage Innovation](#)

» [Families USA Oral Health Care for All Campaign](#)



HEALTH EQUITY



END RACIAL INJUSTICE IN HEALTH AND HEALTH CARE, AND ENSURE ALL INDIVIDUALS AND FAMILIES HAVE EQUAL OPPORTUNITY TO LIVE A HEALTHY LIFE, FREE FROM HEALTH DISPARITIES AND BARRIERS TO CARE BECAUSE OF WHO THEY ARE, WHERE THEY COME FROM, WHERE THEY LIVE, WHAT LANGUAGE THEY SPEAK, OR HOW THEY IDENTIFY.

There is a fundamental problem in our health care system: persistent, extensive, severe, and costly health and health care inequalities based on race, ethnicity, and geography, among other factors. Efforts to transform the health care system must include people from communities most affected by inequities in health and health care. As the COVID-19 pandemic has clearly shown, none of us is safe when any one of us is living paycheck to paycheck, without insurance, and can't afford to take off work if we're sick. Congress can create a more equitable system by passing legislation to:

» **Invest in programs that address the social drivers of health (SDOH) by:**

- › Funding the Office of Minority Health at no less than \$65 million annually.
- › Investing in equitable development through the Community Development Financial Institutions (CDFI) Fund.
- › Engaging in meaningful criminal justice system reform, including reallocating funding into SDOH interventions and proven mental health crisis intervention models.
- › Amending the Center for Medicare & Medicaid Innovation's (CMMI) statutory language to include a focus on improving health equity.

- › Increasing investment in educating consumers and supporting states in becoming compliant with behavioral health parity requirements. Ensure appropriate congressional oversight of implementation.
- › Investing in nonmedical services that are the bedrocks of population and individual health and wellness, including housing supports, environmental safety, nutrition, and transportation, and connecting and coordinating disparate federal systems by braiding and blending federal funding streams to serve children and families more equitably, including Medicaid, juvenile justice, public health (including Maternal and Child Health Services Title V), child welfare, and education.

» **Address the urgent maternal mortality crisis in this country, which is disproportionately impacting Black women, by:**

- › Directing the Centers for Medicare & Medicaid Services (CMS) to implement a demonstration program for free-standing birth centers in order to develop innovative and sustainable payment models for low-risk maternity care.
- › Expanding Medicaid coverage for services provided by community-based doulas, perinatal community health workers, and other peer support service providers, and requiring reimbursement parity for maternity care services provided by midwives.
- › Mandating Medicaid and CHIP coverage of additional preventive services for children exposed to adverse childhood experiences (ACEs) and at-risk pregnant people. Services should include evidence-based parenting classes, family peer support and advocacy services, and domestic violence services.
- › Improving and expanding funding streams and Medicaid coverage for evidence-based home visiting programs like the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program and the Nurse-Family Partnership, and

requiring home visiting programs to be culturally responsive.

» **Modernize the health workforce to be diverse, culturally respectful, accessible, community-based, and equity-focused by:**

- › Restructuring the Graduate Medical Education (GME) system to focus on training the primary care workforce and underrepresented physician and nonphysician specialties, with a particular focus on underserved geographic areas and communities.
- › Expanding and adequately funding the Teaching Health Center Graduate Medical Education (THCGME) program and the National Health Service Corps to address persistent provider shortages.
- › Supporting the growth of the community-based health workforce, including community health workers (CHWs) by sustainably financing their services through Medicaid and CDC funding.
- › Funding the National Health Care Workforce Commission so it can fulfill its authorized mission to make recommendations to Congress on how best to build a workforce that meets the needs of families in the 21st century and beyond.

For an in-depth look at policy recommendations to improve health equity, please visit:

- » [Health Equity Task Force \(HETF\) for Delivery and Payment Transformation](#)
- » [HETF 2021 Federal Policy Priorities](#)

- » [Community Health Worker Sustainability Collaborative](#)
- » [Recommendations to Improve Maternal Health](#)



HEALTH CARE VALUE



GUARANTEE HIGH-QUALITY, LOW-COST, CONSUMER-CENTERED HEALTH CARE BY BRINGING DOWN HEALTH CARE COSTS, CURBING INDUSTRY ABUSES, AND TRANSFORMING THE HEALTH CARE SYSTEM TO PRIORITIZE DELIVERING VALUE AND IMPROVING PEOPLE'S HEALTH.

For far too long, families across America have dealt with low-quality, high-cost care because of the underlying economics of our health care system and the way it is designed. People in this country should never have to worry that they can't afford health care nor should they have to choose between filling a prescription and paying their rent or mortgage. We must fix the broken incentives in our health care system that ensure record profits for huge health corporations while leaving consumers to foot the bill. We need to ban unfair practices like high deductibles that drive people into debt if in their family gets sick, or prescription drug prices that are five or 10 times higher than the price of the same medication in Canada. Congress has the opportunity to create efficient and rational payment and delivery systems to ensure that consumers always come first by passing legislation to:

» **Lower prescription drug costs for America's seniors and families by:**

- › Allowing the government to negotiate for fair and reasonable Medicare drug prices.
- › Restructuring and reforming Medicare Part D, including by lowering out-of-pocket maximums and limiting drug price increases for drugs covered by Part D.
- › Requiring drug manufacturers to report justification for price increases to the secretary of the U.S. Department of Health and Human Services.
- › Ending patent abuses and requiring price transparency throughout the pharmaceutical supply and financing chains.

- › Ensuring that consumers have affordable access to approved drugs that have been developed through significant public investment by preventing manufacturers from being awarded exclusivities that allow for price gouging.

» **Transform our health care system to incentivize affordable, high-quality services centered on health outcomes and value instead of volume of care by:**

- › Requiring CMMI to design and test new delivery and payment models exclusively focused on early intervention and prevention for children using evidence-based interventions.

- › Ensuring payment reform efforts are extended beyond CMMI and across CMS by authorizing and funding alternative payment models that fundamentally shift how Medicare and other payers reimburse specific services.
- › Requiring CMMI and state-level Medicaid or multipayer payment reform initiatives to collect input from a diverse group of consumer advocates, community providers, and other key stakeholders during the request for information/early design phase, the technical expert panel/application phase, and the evaluation design phase to ensure that health disparities experienced by people of color are appropriately accounted for in efforts to move toward value-based payment.

» **Rein in anti-competitive practices and improve pricing by:**

- › Requiring Medicare and Medicaid to pay the same rates for ambulatory care regardless of whether a service was provided via hospital outpatient department, ambulatory surgery center, free-standing or hospital emergency department, or off-campus physician office, thereby lowering costs and protecting access to care in underserved rural and urban communities.

- › Prohibiting anti-competitive terms in provider and insurer contracts that limit access to higher-quality, lower-cost care.

» **Improve data collection and transparency in pricing, costs, and quality by:**

- › Establishing a national all-payer claims database (APCD).
- › Requiring all payers, providers, and public health agencies to participate in mandatory exchange of accurate, real-time data across medical, clinical, prescription drug, dental, behavioral health, and social services, and expanding interoperability standards to support this exchange of data.
- › Requiring payers and providers to disclose negotiated rates.
- › Establishing harmonized reporting of performance measures by providers across all payers, including a core set of disparity reduction measures. Data should be stratified by age, sex, race, ethnicity, and primary language, at a minimum, and be extended to other demographic factors, such as socioeconomic status, gender identity, sexual orientation, and disability, as data are collected and become available.

For an in-depth look at policy recommendations to improve health care value, please visit:

» [*Consumers First: The Alliance to Make the Health Care System Work for Everyone*](#)

» [*Consumers First 2021 Legislative Agenda*](#)

» [*American Families Want Fair Drug Prices*](#)



CONSUMER EXPERIENCE



MAKE CERTAIN THAT POLICY CHANGES ARE INFORMED BY CONSUMER EXPERIENCES, AND THAT THE BEST INTERESTS OF PATIENTS AND FAMILIES ARE AT THE HEART OF EVERY POLICY SOLUTION.

In addition to providing policy expertise and technical assistance, Families USA supports federal and state policy work by incorporating the consumer voice into the policymaking process. We facilitate connections to storytellers, community leaders, and on-the-ground experts who can give testimony at briefings and legislative hearings. We also support congressional communications and policy staff with tested, successful messaging strategies that appeal to the collective values of bipartisan audiences.

For an in-depth look at our communications and messaging work, please visit:

» [United for Health Messaging](#)

» [Our Stories](#)

» [Health Care in Rural America](#)

Families USA Is Here To Help!

For more information on any of these proposed policies, or to talk with us on ways we can partner to improve health and health care, email our Federal Relations team at federalrelations@familiesusa.org, and we can connect you to one of our in-house specialists.

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