

Dear Colleague,

In this edition, the Doctors for America newsletter explores the benefits of national health exchanges versus state exchanges, and has an update on the merging process in Washington. This week, our advocacy for a national health care exchange has been making a difference, letters to the editor continue to take root in newspapers across the nation and your stories are driving the conversation about the need for change. Grassroots efforts continue to spring up as doctors and medical students fight on to make sure the final health care reform bill is the best possible for us and our patients.

As we have all been following in the news, this week an earthquake devastated Port-Au-Prince, Haiti. Amongst the rubble and injuries, there is voluminous need and opportunities abound to extend kindness to the heart of the devastation. We encourage you to offer your help to the nearly 3 million people affected. Follow news updates on the situation from Partners in Health here: <http://act.pih.org/page/invite/earthquake>. For ways to help and to share your thoughts, see our Haiti page: <http://drsforamerica.org/haiti/>

Physicians Making A Difference:

Highlights from the last week

Dr. Lisa Plymate's (WA) [letter to the editor](#) was published in the Seattle Times, and argued that though this health care reform bill is not ideal, it is a good start to increase health care access for Americans.

Dr. Rupin Thakkar (WA) was also published in the Seattle Times. His [letter to the editor](#) described how doctors are finally united in our support for health-care reform.

Dr. Tim McHugh (ID) held a health care reform forum for the Treasure Valley Cluster of ELCA Lutheran Churches -- about 40 attended to hear four physicians, including Karl Watts, the current AAFP Family Physician of the Year discuss reform for two and a half hours.

Dr. Scott Poppen (UT) is leading an effort to collect [500 signatures in Utah](#) from doctors and other health care providers after Congressman Matheson signaled that 500 supportive doctors statewide would convince him change his "no" vote to a "yes."

Hundreds of us have sent stories to the

Key Policy Developments

1. President Obama Rolls Up His Sleeves To Get Health Reform Done

President Obama convened an all day session at the White House Wednesday with Senate and House leaders to hash out the final details of the health care bill. The end of the day brought statements of "significant progress." The marathon session signaled that House and Senate leaders — with the president in the room for much of the day — were far closer to resolution on the issues that have divided the two chambers for months.

The meeting included Pelosi, Hoyer, Reid, Senate Majority Whip Dick Durbin (D-Ill.), White House Chief of Staff Rahm Emanuel and the relevant committee chairmen. Among the issues discussed was how to pay for the legislation — specifically, whether to impose a new excise tax on high-cost employer-sponsored health plans; whether to increase the payroll tax used to finance Medicare; and whether to apply the tax to investment income, like interest, dividends and capital gains. The talks also moved closer to the House position calling for a national health-insurance exchange, rather than state-run exchanges.

White House officials have said they want an agreement as soon as possible, maybe in the next 7-10 days. It will then take time to receive a cost analysis from the Congressional Budget Office and to work of securing the final votes in both chambers. The goal remains to complete the legislation before the State of the Union address, which is expected to be scheduled for a weekday in one of the next few weeks.

Read more about the tenor of the merging process: <http://www.politico.com/news/stories/0110/31506.html>

2. State vs. National Health Exchanges

While both the House and Senate health reform bills include health

President through our new [insurance stories site](#). Many of these are being crafted into Letters to the Editor as well.

One of Doctors for America's major policy priorities, as determined by you the members, national health care exchanges, received attention from the White House this week. See more in the policy section of the newsletter.

Doctors for America joined 118 groups in signing a letter asking Congressional leaders to prioritize increasing Medicaid reimbursement for primary care to Medicare rates as they negotiate the final health care reform bill.

Top 3 Stories

NEJM - [Health Reform and the need for CER](#)

Science Magazine - [The Next Health care Revolution](#)

NY Times - [Health Reform, State and Medicaid](#)

What you can do this week

Send a story to the President

Doctors for America is going back to its roots - sharing the stories of patients who need health reform NOW. Have you told your story yet?

Even if you do not have time to share your own story, pick one of the hundreds of stories on our site and send it to the President with one click. The finish line is in sight, our final push will get us to the goal – meaningful health reform and insurance options for all Americans.

<http://drsforamerica.org/insurancestories/>

insurance exchanges and subsidies to make insurance affordable, they set up and regulate those provisions very differently. The House bill gives more power to the federal government; the Senate bill gives more power to the states.

The House bill creates a federally funded national health insurance exchange run by a new federal agency, the Health Choices Administration (HCA), in cooperation with the states. The HCA would be responsible for negotiating and enforcing regulations with insurers across all states. The Senate bill relies on the states to adopt the federal insurance reforms as their own law and establish their own exchanges with state funds (federal funds could be obtained for start-up costs, but once implemented, states would have to cover the costs). If the federal government determined that a state had failed to implement the insurance reforms by 2014, then the federal government could set up a federal exchange in that state. Additionally in the Senate bill after 2017, states could opt out of most of the remaining requirements of the legislation (including the individual and employer mandates and the provisions regarding affordability credits) to pursue their own reform programs.

Medicaid, another joint federal–state effort, has similarly resulted in a constant tug-of-war between state and federal government and has resulted in widely varying levels of Medicaid coverage across the country.

The President has signaled this week that he favors a national health insurance exchange approach to provide consistent and standardized coverage to all Americans. The battle continues to see if the pendulum will swing toward federal or state government control of the health insurance exchange.

Read more about the President's position on National Exchanges:
http://www.bostonherald.com/news/us_politics/view.bg?articleid=1225157

For more on the differences between national and state exchanges:
<http://www.kff.org/ahr010810video.cfm>

3. Financing Health Care Reform - One Step Closer

One of the ways the House and Senate health care reform bills differed when passed by their respective chambers was how reform will be financed. The House has a 5.4% income-tax surcharge on couples with incomes above \$1 million and individuals with incomes above \$500,000. The Senate imposes a 40% excise tax on the most costly employer-sponsored health plans and also increases the Medicare payroll tax on individuals with incomes over \$200,000 and couples with incomes over \$250,000. The excise tax raised concerns from organized labor and by some business organizations claiming that approach presumes that high premiums are equivalent to excellent benefits, which is not always the case.

Last night, a compromise was reached on the excise tax between the two



Weekly Update

January 15, 2010

Tell us what you've been up to

The physicians in action section of this update comes from what you tell us. Send us an e-mail and let us know what you've been up to.

sides in a lengthy session at the White House. Labor leaders said the new compromise set the tax threshold for family plans from \$23,000 to \$24,000 in 2013, taking into account the quality of benefits in those plans as well as the rate of inflation. Further details to follow.

Read more about the deal between labor leaders and Congress on the so called "Cadillac Tax"

here: <http://voices.washingtonpost.com/44/2010/01/white-house-unions-reach-deal.html?hpid=topnews>

Thank you to all of you who emailed us to let us know what you've been up to. Your e-mails provide the content for the "Physicians Making a Difference" section.

Thank you, also, for your feedback. Let us know how we can improve this newsletter. Remember, you can share this newsletter via [facebook](#), [twitter](#), or [linkedIn](#). You can also download this newsletter as a [PDF](#).

Sincerely,

Mandy Krauthamer Cohen MD, MPH and the Doctors for America Team