

June 9, 2009

Dear Member of Congress:

On behalf of the undersigned organizations, we want to express our support for health care reform proposals designed to improve access to preventive services and encourage healthy lifestyles. We support positive incentives to encourage individuals to be actively engaged in their health care, pursue recommended screenings and preventive services, and maintain or improve their health through physical activity, healthful diets, good nutrition, smoking cessation, and other healthy behaviors. At the same time, we are very concerned that individuals not be penalized -- either financially or by exclusion from coverage or services -- if they are sick or if they presently engage in specific behaviors or have certain health conditions, such as smoking or obesity.

Many insurance products are not designed to encourage wellness and prevention. Too often, out-of-pocket costs pose barriers to services that promote wellness and health maintenance. We support proposals to reduce financial barriers for recommended preventive screenings and immunizations. However, we will oppose provisions that give health plans expanded authority to alter premiums or cost sharing based on health status, "unhealthy" behaviors, non-adherence to specified life changes or treatment regimens, or failure to meet improvement targets. These practices could put the cost of coverage beyond the reach of those who may be least able to change their health habits and yet are greatly in need of health care coverage and services. They may also be discriminatory, could compromise an employee's right to privacy in the workplace, and have not been shown to be an effective long-term strategy for improving individual health or lowering overall health care costs.

The Health Insurance Portability and Accountability Act's (HIPAA) nondiscrimination provisions generally prohibit a group health plan from charging individuals different premiums based on health factors. However, under current regulatory authority, plans may modify premiums co-payments or deductibles by no more than 20 percent of the cost of employee-only coverage in return for adherence to programs of health promotion and disease prevention. We see no justification for expanding this policy.

Our organizations strongly endorse multi-pronged policy approaches to help people modify behaviors that can result in poor health outcomes. We believe that greater use of evidence-based interventions that support healthy lifestyles, slow or prevent the onset of disease, and improve or maintain function can yield a generous return for a relatively modest investment. We agree that employers can play an important role in promoting better health through onsite wellness and prevention programs, as well as providing health coverage with cost-sharing structured to encourage wellness and health maintenance. Well-designed employer-sponsored programs have been shown to improve health outcomes, increase productivity and lower health care costs. We believe that all stakeholders - individuals, businesses, insurers, providers, and government -- must play a role in improving the health of our population and reducing the health and economic toll of chronic disease. We strongly believe that the key to driving behavior change is creating environments that support healthy behaviors and give individuals the tools and support needed to

implement change. We stand ready to work with you to find strategies and approaches that best work for employees, employers and taxpayers as we attempt to reduce the terrible physical and financial toll that disease and disability exact upon our nation.

Sincerely,

American Association of People with Disabilities (AAPD)  
AARP  
AFL-CIO  
American Cancer Society-Cancer Action Network  
American Diabetes Association  
American Federation of State, County and Municipal Employees (AFSCME)  
American Heart Association/American Stroke Association  
American Lung Association  
American Psychological Association  
Arthritis Foundation  
Bazelon Center for Mental Health Law  
Black Women's Health Imperative  
Campaign for Mental Health Reform  
Center for Advancing Health  
Center for Medical Consumers  
Center for Medicare Advocacy  
Childbirth Connection  
Clinical Social Work Association  
Consumers Union  
Families USA  
Family Voices  
International Association of Machinists & Aerospace Workers  
International Union, United Automobile, Aerospace & Agricultural  
Implement Workers of America, UAW  
Leukemia and Lymphoma Society  
Medicare Rights Center  
Mental Health America  
National Association of County Behavioral Health and Developmental Disability Directors  
National Association of State Mental Health Program Directors  
National Capital Area Union Retirees Club  
National Coalition of Mental Health Professionals and Consumers  
National Coalition for Lesbian, Gay, Bisexual and Transgender Health  
National Congress of the American Indians  
National Consumers League  
National Council for Community Behavioral Healthcare  
National Council of Jewish Women  
National Council on Aging  
National Disability Rights Network  
National Health Law Program

National Multiple Sclerosis Society  
National Partnership for Women & Families  
National Patient Advocacy Foundation  
National Women's Health Network  
National Women's Law Center  
Paul Smith, MD  
Poverty & Race Research Action Council  
Prevent Blindness America  
Raising Women's Voices for the Health Care We Need  
Service Employees International Union (SEIU)  
Steelworkers Organization of Active Retirees  
US Psychiatric Rehabilitation Association  
United Steelworkers (USW)