







UPDATED CHART #2: SIDE-BY-SIDE COMPARISON OF 2008 DEMOCRATIC CANDIDATES' HEALTH PLANS, LISTED ALPHABETICALLY: G-Z

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	<u>Mike Gravel</u> 	<u>Dennis Kucinich</u> 	<u>Barack Obama</u> 	<u>Bill Richardson</u> 
Health Care Plan Release Date	No formal announcement	Originally introduced H.R. 676, "The United States National Health Insurance Act" in the U.S. House of Representatives in 2003 Reintroduced the Act in January 24, 2007	May 29, 2007	March 24, 2007
Stated Goals for Coverage	<ul style="list-style-type: none"> ➤ Advocates for a universal healthcare system that provides equal medical services for all citizens¹ ➤ Would issue free vouchers to all Americans to cover comprehensive medical services² ➤ All Americans could use their vouchers to select their own health care professional³ 	<ul style="list-style-type: none"> ➤ Provide comprehensive health care coverage for all Americans through a universal, non-profit, single payer system that is publicly financed and privately delivered^{4,5} 	<ul style="list-style-type: none"> ➤ Provide affordable, comprehensive, and portable health insurance for every American⁶ 	<ul style="list-style-type: none"> ➤ Provide affordable and secure health coverage for every American⁷
Implementation Timeline	No information found	<ul style="list-style-type: none"> ➤ Conversion to a not-for-profit health care system will occur over a 15 year period [H.R. 676]¹⁶ 	<ul style="list-style-type: none"> ➤ Will achieve a universal health care system in four years⁸ 	<ul style="list-style-type: none"> ➤ All Americans required to obtain coverage by the end of his first term¹⁴
Mandatory Requirement to Obtain Insurance &	<ul style="list-style-type: none"> ➤ Proposes issuing free vouchers to all Americans for coverage of comprehensive medical services, including vision, dental, and catastrophic care² 	<ul style="list-style-type: none"> ➤ Health insurance provided for all Americans through universal single payer, not -for- profit health care system⁴ 	<ul style="list-style-type: none"> ➤ Prefers to make insurance more affordable for U.S. residents rather than make it mandatory¹⁰ 	<ul style="list-style-type: none"> ➤ All Americans required to obtain coverage by the end of his first term¹⁴ ➤ All Americans will have the choice to keep their current

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<p>Structure of Coverage</p>	<ul style="list-style-type: none"> ➤ Individuals would sign up for a voucher from the Federal Government, which would give them the choice of 5 or 6 insurance plans⁹ ➤ Insurance companies would compete on the basis of administration but not determine what care people receive⁹ ➤ Vouchers would require a modest co-pay and modest deductible¹ ➤ Individuals can purchase additional health vouchers beyond what they are issued¹ ➤ Regional health boards would determine what vouchers are for (will change every year depending on personal health history and age)¹ ➤ Voucher plan would allow choice of doctors and hospitals¹ 	<ul style="list-style-type: none"> ➤ Enhanced “Medicare for Everyone”⁵ ➤ Embodied in the Conyers-Kucinich bill H.R. 676 - The United States National Health Insurance Act⁴ ➤ HR 676 will negotiate reimbursement rates annually with physicians, allow for global budgets (monthly lump sums for operating expenses) for hospitals, and negotiate prices for prescription drugs, medical supplies and equipment [H.R. 676]¹⁶ ➤ A “Medicare For All Trust Fund” will be established to ensure a dedicated stream of funding [H.R. 676]¹⁶ 	<ul style="list-style-type: none"> ➤ Believes that most families want health care, but can't afford it¹⁰ ➤ Mandatory coverage of children⁶ ➤ Expand the number of options for young people up to age 25 to continue coverage through their parents' plans⁶ ➤ Americans will be able to maintain their current coverage if they choose to⁶ ➤ Uninsured individuals will be covered by a new national health plan that has:⁶ <ul style="list-style-type: none"> • Guaranteed eligibility⁶ • Comprehensive benefits similar to those offered through the Federal Employee Health Benefit Program (FEHBP)⁶ • Easy enrollment⁶ • Portability and choice⁶ 	<p>coverage¹⁴</p> <ul style="list-style-type: none"> ➤ Americans will have affordable choices through 1) the same plan as members of Congress; 2) Medicare for those 55-64; 3) Medicaid and SCHIP for low income families; 4) existing family coverage for young adults up to age 25 and 5) for veterans, a Heroes Health Card and strengthened Veterans Administration services¹⁴
<p>Employer Mandate</p>	<ul style="list-style-type: none"> ➤ States that universal health-care voucher plan will relieve American businesses of the financial responsibility of providing health insurance for their workers while ensuring that their employees receive adequate care³ 	<ul style="list-style-type: none"> ➤ Establish employer/employee payroll tax of 4.75% (includes present 1.45% Medicare tax) ➤ This means that for an employee earning the median annual family income of \$56,200, the employer would pay about \$2,700 per year¹⁶ 	<ul style="list-style-type: none"> ➤ Employers that do not offer adequate insurance or make significant contributions to quality health coverage for their employees will be required to contribute a percentage of payroll toward the costs of the national plan⁶ ➤ Believes that protecting and promoting health is a shared responsibility among individuals, families, schools, employers, the medical and public health workforce, and Federal, state and local governments⁶ ➤ Smallest businesses (less than 15 employers) are exempt 	<ul style="list-style-type: none"> ➤ Employers will be required to do their fair share to contribute to a healthy and covered workforce¹⁴ ➤ Require small employers to contribute to their employees' health care premiums, or pay to help the uninsured purchase coverage¹⁴ ➤ Contributions of employers will be determined on a sliding-scale basis according to the size of the business¹⁴

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			from the requirement that they provide coverage for their employees ¹¹	
Costs of Plan	No information found	No information found	➤ \$50 billion to \$65 billion annually ¹²	➤ \$104-110 billion per year ¹⁴
How costs are covered	➤ Paid for by a retail sales tax (a portion of the Progressive Fair tax) ¹	<ul style="list-style-type: none"> ➤ Financed by payroll taxes¹⁵ ➤ Reduce funding for the Pentagon and war and invest these funds into healthcare, education, housing, job creation and rebuilding the infrastructure¹³ ➤ Maintain current federal and state funding for existing health care programs [H.R. 676]¹⁶ ➤ Establish employer/employee payroll tax of 4.75% (includes present 1.45% Medicare tax)¹⁶ ➤ Establish a 5% health tax for the top 5% of income earners, 10% tax on top 1% of wage earners [H.R. 676]¹⁶ ➤ ¼ of 1% stock transaction tax ➤ Close corporate tax loopholes ➤ Repeal the Administration's tax cuts for the highest income earners [H.R. 676]¹⁶ ➤ Funding for existing public programs such as Medicare, SCHIP, and Medicaid will be transferred to the new public plan²² ➤ An annual appropriation will be authorized to ensure adequate funding levels for the program [H.R. 676]¹⁶ 	<ul style="list-style-type: none"> ➤ Proposes four steps to modernize U.S. health care system and contain health care costs: 1) offer Federal reinsurance to employers to help ensure that unexpected or catastrophic illnesses do not make health insurance unaffordable or out of reach for businesses and their employees, 2) ensure that patients receive and providers deliver quality care, 3) adopt state-of-the-art health information technology systems, and 4) reform market structure to increase competition⁶ ➤ Tax cuts on dividends and capital gains and for individuals with annual incomes of more than \$250,000 set to expire in 2010¹² ➤ May increase taxes on inheritances valued at more than \$7 million¹² ➤ Partnerships among Federal and state governments, employers, providers, and individuals⁶ ➤ Provide income-related Federal subsidies for individuals and families who do not qualify for Medicaid or SCHIP⁶ ➤ Eliminate excessive subsidies of Medicare Advantage plans 	<ul style="list-style-type: none"> ➤ Cut costs by streamlining administrative costs and investing in prevention¹⁴ ➤ Limit overpayments to private Medicare Advantage Plans¹⁴ ➤ Provide sliding-scale tax credits for Americans that need help in purchasing coverage¹⁴ ➤ Provide immediate relief from high interest rates for medical debt charged on credit cards¹⁴

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			and pay these plans the amount paid to treat the same patients under regular Medicare ⁶	
Estimated Savings	No information found	<ul style="list-style-type: none"> ➤ Annual savings from enacting H.R. 676 are estimated at \$387 billion [H.R. 676]¹⁶ ➤ Federal costs will be similar to the current level, but all Americans will be covered¹⁶ ➤ Savings from reduced administrative costs, bulk purchasing, coordination among providers, and reduction in health care inflation over the long term [H.R. 676]¹⁶ ➤ Families and businesses will pay less [H.R. 676]¹⁶ 	<ul style="list-style-type: none"> ➤ Up to \$2,500/year/family⁶ ➤ Up to \$200 billion/year¹² ➤ Up to \$30 billion by repealing the ban on direct negotiation with drug companies⁶ ➤ Savings achieved through health IT investment, prevention and management of chronic conditions, reduction of uncompensated care, increase in insurance industry competition, reduction of insurance overhead and cost of premiums⁶ ➤ Estimated savings of up to \$77 billion/year from hospital and doctor adoption of electronic health records⁶ 	<ul style="list-style-type: none"> ➤ Up to \$110 billion per year¹⁴ ➤ By covering all Americans and reducing uncompensated care, the plan would save the average family up to 10% of the cost of their private insurance¹⁴
Insurance Pools	No information found	No information found	<ul style="list-style-type: none"> ➤ Establish National Health Insurance Exchange to help individuals who want to purchase a private insurance plan⁶ ➤ Through the Exchange, any American will have the opportunity to enroll in the new public plan or purchase an approved private plan⁶ ➤ Income-based sliding scale subsidies will be provided for people and families who need it⁶ ➤ All plans offered must be at least as generous as new public plan and meet the same standards for quality and efficiency⁶ ➤ Insurers required to justify an 	No information found

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			<p>above-average premium increase to National Health Insurance Exchange⁶</p> <ul style="list-style-type: none"> ➤ Exchange will act as a watchdog and help reform the private insurance market. It will establish rules and standards for participating insurance plans to ensure fairness and to make individual coverage more affordable and accessible⁶ ➤ Will evaluate plans and make the differences between them transparent to consumers⁶ 	
<p align="center">New Federal/Public Plans</p>	<ul style="list-style-type: none"> ➤ Federal Government would issue annual health care vouchers to Americans based on their projected needs (as determined by age and personal medical history)³ ➤ Create central body called "Health Care Board" with regional boards to define what the various vouchers are for¹ ➤ Would consider creating a government program modeled after Medicare for people to choose from in addition to the 5 or 6 private plans¹ 	<ul style="list-style-type: none"> ➤ Enhanced "Medicare for Everyone" under H.R. 676 that is publicly financed and privately delivered⁵ ➤ Coverage will be more comprehensive than private insurance plans⁵ ➤ Buy out private health insurance companies through treasury bonds¹⁵ ➤ Health insurance company workers who lose their job during the transition to non-profit health care system will be the first to be hired and retrained under this Act. Those who are not rehired would receive 2 years of unemployment benefits¹⁶ ➤ Program will cover all medically necessary services, including primary care, inpatient, outpatient, and emergency care, prescription drugs, durable medical equipment, hearing services, long term care, mental health services, dentistry, eye care, 	<ul style="list-style-type: none"> ➤ Establish new national health plan⁶ <ul style="list-style-type: none"> • Will provide affordable, comprehensive, and portable health coverage that is similar to plan available to Federal employees (FEHBP)⁶ • Will be open to individuals without access to group coverage, to those who are self-employed, and to small businesses that want to offer insurance to their employees⁶ • Easy enrollment process⁶ ➤ States can continue to experiment with their own plans provided that they meet the minimum standards of the national plan⁶ ➤ Provide income-related Federal subsidies for individuals and families who do not qualify for Medicaid or SCHIP to purchase the new 	<ul style="list-style-type: none"> ➤ Americans will have affordable choices through purchasing: 1) the same plan as offered to Members of Congress; 2) Medicare for those 55-64; 3) Medicaid and SCHIP for lower income families; 4) existing family coverage for young adults up to age 25 and 5) for veterans, a Heroes Health Card and expanded services through the Veterans Administration¹⁴

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		<p>chiropractic, substance abuse treatment, and alternative and complimentary medicine [H.R. 676]¹⁶</p> <ul style="list-style-type: none"> ➤ Patients have their choice of physicians, providers, hospitals, clinics, and practices [H.R. 676]¹⁶ ➤ No co-pays or deductibles are permissible under this act [H.R. 676]¹⁶ 	<p>public plan or to buy a private health care plan⁶</p> <ul style="list-style-type: none"> ➤ Reimburse employer health plans for a portion of catastrophic costs above a threshold if employers guarantee that these savings will be used to reduce cost of workers' premiums⁶ 	
Veterans' Health Care Initiatives	<ul style="list-style-type: none"> ➤ Ensure that veterans receive full benefits for their most critical needs, including treatment for post traumatic stress disorder¹ ➤ Make permanent the 100% disability ratings of those diagnosed with Post-Traumatic Stress Disorder (PTSD)¹⁷ ➤ Ensure that the VA system is fully financed and has sufficient numbers of well-trained personnel to provide quality care that is available¹⁷ 	No Information Found	<ul style="list-style-type: none"> ➤ Increase the Department of Veterans Affairs' budget¹⁸ ➤ Improve mental health services for veterans¹⁸ ➤ Require face-to-face mental health screenings for all service members¹⁸ 	<ul style="list-style-type: none"> ➤ Guarantee full funding for Veterans' healthcare¹⁹ ➤ Provide veterans with a Heroes Health Card¹⁹ ➤ Enlist health care providers to accept Heroes Health Card and coordinate health services with veteran's local VA hospitals¹⁹
State Flexibility	No information found	No information found	<ul style="list-style-type: none"> ➤ States can continue to experiment with their plans provided that they meet the minimum standards of the national plan⁶ 	No information found
Medicaid	<ul style="list-style-type: none"> ➤ Phase out Medicare and Medicaid over time²⁰ 	<ul style="list-style-type: none"> ➤ Funding for existing public programs such as Medicare, SCHIP, and Medicaid will be transferred to the new public plan²² 	<ul style="list-style-type: none"> ➤ Expand eligibility for Medicaid⁶ 	<ul style="list-style-type: none"> ➤ Improve coordination of care and reduce bureaucracy for people with disabilities enrolled in both Medicare and Medicaid¹⁴ ➤ Expand SCHIP and Medicaid to cover low-income children and families¹⁴

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Coverage for Children	➤ Federal Government would issue annual health care vouchers to Americans based on their projected needs (as determined by age and personal medical history) ³	➤ Covers all children ⁴	<ul style="list-style-type: none"> ➤ All children required to have coverage⁶ ➤ Expand eligibility for SCHIP⁶ ➤ Expand the number of options for young people up to age 25 to continue coverage through their parents' plans⁶ 	<ul style="list-style-type: none"> ➤ Expand SCHIP and Medicaid to cover low-income children and families¹⁴ ➤ Allow young adults up to age 25 to keep family coverage, regardless of their student status¹⁴
Health Insurance Regulations/ Eligibility	<ul style="list-style-type: none"> ➤ Prohibits exclusion based on health, income level, or any other reason³ ➤ People will not be disqualified based on a pre-existing condition¹ 	<ul style="list-style-type: none"> ➤ All individuals residing in the U.S. are eligible, including undocumented immigrants^{4,15} ➤ Only public or non-profit providers may participate in the program[H.R. 676]²² ➤ Private health insurers shall be prohibited under this act from selling coverage that duplicates the benefits of the H.R. 676 program. Exceptions to this rule include coverage for cosmetic surgery, and other procedures and elective treatments [H.R. 676]¹⁶ 	<ul style="list-style-type: none"> ➤ Proposed health plan would ensure that no American is denied access to health care because of illness or pre-existing conditions^{6, 15} ➤ Increase Federal regulations on mergers between health insurers¹² ➤ Prevent insurance companies from enacting unjustified price increases⁶ ➤ In markets where the insurance business is not competitive, make sure that insurers pay a reasonable share of their premiums for patient care as opposed to administrative costs⁶ 	<ul style="list-style-type: none"> ➤ Place cost controls on insurance companies to ensure that they spend at least 85% of their revenue on direct health care rather than administrative costs¹⁴
Public Reporting & Transparency	No information found	No information found	<ul style="list-style-type: none"> ➤ Simplify paperwork for providers⁶ ➤ Require hospitals and providers to collect and publicly report measures of health care costs and quality⁶ ➤ Require health plans to disclose percentage of premiums spent on direct patient care⁶ 	<ul style="list-style-type: none"> ➤ Require insurance companies and providers to standardize their forms¹⁴ ➤ Promote transparency on price and quality of health care¹⁴ ➤ Simplify reporting requirements for physicians and hospitals¹⁴
Improving Quality and Performance of Health System	➤ Create a network of regional health care organizations modeled after the Federal Reserve system to ensure quality of care ²	➤ Appoint Director of an Office of Quality Control who will provide annual recommendations to Congress, the President, the Secretary of	➤ Participating providers in new public plans, National Health Insurance Exchange, Medicare, and FEHBP will be rewarded for achieving	<ul style="list-style-type: none"> ➤ Promote evidence-based care and comparative effectiveness research¹⁴ ➤ Require that all health plans cover a standard set of

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		HHS, and other program officials on how to ensure the highest quality health care [H.R. 676] ²²	<p>performance thresholds on physician-validated outcome measures⁶</p> <ul style="list-style-type: none"> ➤ Require hospitals and providers to collect and report data to ensure standards are being met for quality, health information technology, patient safety, and administration⁶ ➤ Establish an independent Institute to guide reviews and research about which drugs, devices and procedures are the most effective diagnostic and treatment options for individual patients⁶ 	<p>evidence-based preventive services, such as well-child visits, cancer screenings, and chronic disease management programs¹⁴</p> <ul style="list-style-type: none"> ➤ Realign Federal reimbursement policies for hospitals and physicians, using quality measures (developed and approved by physicians) to reward those who provide quality care, chronic disease management, improve patient safety, and successfully deliver effective preventive services and treatments to patients¹⁴ ➤ Expand patient safety training programs at the federal, state, and local levels¹⁴ ➤ Require health care facilities to report preventable errors¹⁴ ➤ Support system-wide changes in hospitals to improve patient safety and prevent avoidable hospitalizations¹⁴
<p>Health IT**</p> <p><u>For more information</u></p>	<ul style="list-style-type: none"> ➤ Computerize entire health history of every American (using Veterans Administration system as a model)¹ ➤ All Americans will have a PIN number that physicians can use to look up their medical history¹ ➤ Computerize all billing records¹ 	<ul style="list-style-type: none"> ➤ Create uniform computerized electronic billing system, (including in those areas of the U.S. where electronic billing is not yet established) [H.R. 676]²² 	<ul style="list-style-type: none"> ➤ Estimated savings of up to \$77 billion/year from hospital and doctor adoption of electronic health records⁶ ➤ Invest \$10 billion/year over the next five years towards the broad adoption of standards-based electronic health information system, including electronic health records⁶ ➤ Adopt standards-based electronic health information systems including electronic health records⁶ ➤ Phase in requirements for full implementation of health IT and commit the necessary federal resources to make it 	<ul style="list-style-type: none"> ➤ Invest in health IT through 21st century Health Care Bonds¹⁴ ➤ Streamline health care administration by requiring insurance companies and providers to standardize their forms, simplify reporting requirements for physicians and hospitals, and invest in health information technology¹⁴

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			<p>happen⁶</p> <ul style="list-style-type: none"> ➤ Ensure that these systems are developed in coordination with providers and frontline workers, including those in rural and underserved areas⁶ ➤ Ensure protection of patients' privacy⁶ 	
Malpractice/ Professional Liability	No information found	No information found	<ul style="list-style-type: none"> ➤ Promote new models for addressing physician errors that improve patient safety, strengthen the doctor-patient relationship, and reduce malpractice suits⁶ ➤ Require providers to report preventable medical errors and support hospital and physician practice improvement to prevent future occurrences⁶ ➤ Strengthen antitrust laws to prevent insurers from overcharging physicians for malpractice insurance⁶ 	No information found
Increasing Drug Availability and Reducing Their Costs	No information found	➤ Coverage includes prescription drugs ⁵	<ul style="list-style-type: none"> ➤ Increase competition in prescription drug market⁶ ➤ Allow Federal government to negotiate prescription drug prices directly with pharmaceutical companies under Medicare prescription drug benefit⁶ ➤ Allow Americans to buy their medicines from other developed countries if the drugs are safe and prices are lower than in U.S.⁶ ➤ Ensure that market power does not lead to higher prices for consumers⁶ ➤ Increase use of generic drugs in the new public plan, Medicare, Medicaid, and 	<ul style="list-style-type: none"> ➤ Allow seniors to buy prescriptions directly from Medicare¹⁴ ➤ Increase the use of generic drugs¹⁴ ➤ Make Medicare Part D prescription drug program more efficient and negotiate prescription drug prices¹⁴

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			FEHBP ⁶ ➤ Prohibit large drug companies from keeping generics out of market ⁶	
Disease Prevention	➤ States that the President should provide leadership to promote a healthier culture, energizing people to exercise and eat nutritious foods ⁹	➤ Emphasizes prevention [H.R. 676] ^{22, 5}	<ul style="list-style-type: none"> ➤ Emphasizes prevention⁶ ➤ Provide support for school-based health screening programs and clinical services⁶ ➤ Increase financial support for physical education, and health educational programs for students⁶ ➤ Work with schools to establish healthier environments for children, including assistance with contract policy development for local vendors⁶ ➤ Provide support for school-based health screening programs and clinical services⁶ ➤ Expand funding – including loan repayment, adequate reimbursement, grants for training curricula, and infrastructure support --to ensure a strong workforce that will champion prevention and public health activities⁶ ➤ Require coverage of clinical preventive services (including cancer screenings and smoking cessation programs) in all federally supported health plans, including Medicare, Medicaid, SCHIP, and the new public plan⁶ ➤ Increase funding to expand community based preventive interventions ➤ Supports building healthy 	<ul style="list-style-type: none"> ➤ Pay up-front for coverage to avoid emergency care later¹⁴ ➤ Promote coordinated care and disease management¹⁴ ➤ Require that all health plans cover a standard set of evidence-based preventive services¹⁴ ➤ Support local, state, and regional efforts to prevent and manage chronic diseases¹⁴ ➤ Require physical education programs in schools²¹ ➤ Provide incentives to businesses to invest in employee health by providing health education, nutrition, and exercise programs, design benefits that include financial incentives for prevention, and encourage employees to get preventive check-ups and receive recommended follow-up care¹⁴ ➤ Promote individual behavior to improve health¹⁴ ➤ Institute nation-wide ban on smoking¹⁴ ➤ Support improvements in environmental infrastructure such as biking and walking trails, increased physical activity in schools, and policies that promote access to more affordable healthy foods¹⁴ ➤ Supports public-private partnerships to improve Americans' health literacy¹⁴

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			environments for Americans, including sidewalks, biking paths and walking trails; local grocery stores with fruits and vegetables; restricted advertising for tobacco and alcohol to children; and wellness and health education campaigns ⁶	
Chronic Disease Management	No information found	No information found	<ul style="list-style-type: none"> ➤ Supports disease management programs⁶ ➤ Encourage team care through medical home type models that will improve coordination and integration of care⁶ ➤ Require that plans participating in the new public plan, Medicare, or the Federal Employee Health Benefits Program (FEHBP) utilize proven disease management programs⁶ ➤ Reimburse employer health plans for a portion of the catastrophic costs above a threshold if they will guarantee that savings will be used to reduce the cost of workers' premiums⁶ 	<ul style="list-style-type: none"> ➤ Support "Independence at Home" program that includes the adoption of state-of-the-art chronic disease management programs to allow patients to care for patients in their homes using personal health monitoring devices¹⁴ ➤ Promote reimbursement for enhanced care management, information systems, and provider participation in care coordination, particularly for patients with multiple chronic diseases¹⁴ ➤ Provide increased flexibility to states to allow them to better streamline Federal prevention and public health grants¹⁴ ➤ Encourage individual responsibility for healthy behavior¹⁴
Long Term Care	No information found	<ul style="list-style-type: none"> ➤ Covers long term care [H.R. 676]²² ➤ Appoints a Director of Long Term Care who will be responsible for ensuring the availability and accessibility of high quality long-term care services [H.R. 676]²² 	No information found	No information found
Mental Health	No information found	<ul style="list-style-type: none"> ➤ Coverage includes mental health services⁵ 	<ul style="list-style-type: none"> ➤ Supports mental health parity²³ 	<ul style="list-style-type: none"> ➤ Support the formation of integrated primary care teams that include primary care and

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				<p>mental health providers¹⁴</p> <ul style="list-style-type: none"> ➤ Ensure that health plans provide full parity for mental health and physical health benefits¹⁴
Eliminating Health Disparities	No information found	<ul style="list-style-type: none"> ➤ Reduce health disparities by race, ethnicity, income and geographic region [H.R. 676]²² ➤ Provide high quality, cost-effective, culturally appropriate care to all individuals regardless of race, ethnicity, sexual orientation, or language [H.R. 676]²² 	<ul style="list-style-type: none"> ➤ Address differences in access to health coverage and promote prevention and public health⁶ ➤ Require hospitals and health plans to collect, analyze, and report health care quality for disparities and across diverse populations⁶ ➤ Hold hospitals and health plans accountable for any differences found⁶ ➤ Diversify the workforce to ensure culturally effective care⁶ ➤ Implement and fund evidence-based interventions, such as patient navigator programs⁶ ➤ Will tackle the root causes of health disparities by addressing differences in access to health coverage and promoting prevention and public health³⁵ ➤ Support and expand capacity of safety-net institutions that provide a disproportionate amount of care for underserved populations⁶ 	<ul style="list-style-type: none"> ➤ Reduce health disparities¹⁴ ➤ Supports training programs for minority health professionals¹⁴ ➤ Support efforts to increase the number of minorities who have “medical homes”¹⁴ ➤ Elevate Office of Indian Affairs to a Cabinet level office¹⁴ ➤ Encourage physicians to practice in primary care and underserved rural areas by expanding training, scholarship, and loan repayment programs¹⁴
Health Workforce Issues	<ul style="list-style-type: none"> ➤ Provide financial aid to new doctors and nurses to pay for education costs² 	No information found	<ul style="list-style-type: none"> ➤ Expand funding – including loan repayment, adequate reimbursement, grants for training curricula, and infrastructure support to improve working conditions – to ensure a strong public health workforce⁶ 	<ul style="list-style-type: none"> ➤ Work to fix shortages in critical professions such as nursing ➤ Rebalance the supply of physicians to encourage practice in primary care and underserved rural areas by expanding training, scholarship, and loan repayment programs¹⁴

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<p>Research Investments***</p> <p><u>For more information</u></p>	<ul style="list-style-type: none"> ➤ Supports stem cell research²⁴ 	<ul style="list-style-type: none"> ➤ Supports significant increases in funding for research and development of pharmaceuticals through the NIH²⁵ ➤ Remove patent protection on pharmaceuticals produced with public funds²⁵ 	<ul style="list-style-type: none"> ➤ Supports an expansion of Federal funding for embryonic stem cell research²⁶ ➤ Increase funding for the NIH, NCI, and other medical research²⁷ ➤ Supports doubling Federal funding of basic research over the next five years²⁸ ➤ Invest \$42 billion more in university-based R&D²⁸ ➤ Invest in future innovators by training 100,000 more engineers and scientists over the next four years ➤ Provide new research grants to the most outstanding young scientists in the country²⁸ ➤ Establish an independent institute for comparative effectiveness research to determine which drugs, devices and procedures are the best diagnostic and treatment options for patients⁶ 	<ul style="list-style-type: none"> ➤ Double the NIH budget over ten years²⁹ ➤ Increase research and training opportunities for minority scientists and health professionals²⁹ ➤ Provide for capacity building initiatives to help rural and minority communities to compete more effectively for funds²⁹ ➤ Will lift the ban on Federal funding for stem cell research³⁰ ➤ Would provide Federal funding for embryonic stem cell research³⁰
<p>Special Disease Initiatives: Cancer</p>	<p>No information found</p>	<p>No information found</p>	<ul style="list-style-type: none"> ➤ Wage a war on cancer with increased resources²⁷ ➤ Expand the funding and scope of breast cancer research programs in the Federal government including the Department of Defense Peer-Reviewed Breast Cancer Research Program²⁷ ➤ Enact the Breast Cancer Environmental Research Act²⁷ ➤ Support and expand the Medicaid Breast and Cervical Cancer Treatment Program²⁷ 	<ul style="list-style-type: none"> ➤ Increase cancer research by 206% over a ten-year period²¹ ➤ Improve access to screening²¹ ➤ Fund cancer research, along with healthcare and education, by reinvesting the \$450 billion spent on the War in Iraq²¹ ➤ Fully fund the Department of Defense Peer-Reviewed Breast Cancer Research Program³¹ ➤ Create a Cabinet-level "Cancer Czar" that will oversee the Federal government's efforts to battle the disease³¹ ➤ Enact the Breast Cancer Environmental Research Act³¹ ➤ Preserve the Medicaid Breast

**CHART #2: SIDE-BY-SIDE COMPARISON OF 2008 DEMOCRATIC CANDIDATES' HEALTH PLANS
LISTED ALPHABETICALLY: G-Z**

<p>Special Disease Initiatives: HIV/AIDS****</p> <p><u>For more information</u></p>	<p>No information found</p>	<ul style="list-style-type: none"> ➤ Signed 08stopaids.org "Presidential Pledge for Leadership on Global AIDS"³² ➤ Supports increasing Federal appropriations for science-based HIV prevention programs to no less than \$1 billion annually³³ ➤ Supports the Microbicide Development Act, which creates an office within the NIH dedicated to the discovery and development of anti-HIV topical agents to prevent sexual transmission of HIV³³ ➤ Supports the Early Treatment for HIV Act, which expands Medicaid for HIV+ individuals³³ ➤ Supports increased funding for Housing Opportunities for People with AIDS (HOPWA) and other pertinent Federal housing programs³³ ➤ Invest \$30 billion over 4 years in global fight against AIDS³⁴ ➤ Supports the U.S. investing its fair share towards the WHO's funding goal to address the shortage of trained health care workers in the developing world³³ ➤ Supports legislation to lift the ban on Federal funding for needle exchange³³ 	<ul style="list-style-type: none"> ➤ Released his own HIV/AIDS plan to combat national and global HIV/AIDS³⁵ ➤ During first year of his Presidency will develop and implement a national HIV/AIDS strategy that includes all Federal agencies³⁵ ➤ Signed 08stopaids.org "Presidential Pledge for Leadership on Global AIDS"³² ➤ Expand funding for AIDS research, especially for prevention options including a vaccine and microbicides³⁵ ➤ Supports the Microbicide Development Act, which creates an office within the NIH dedicated to the discovery and development of anti-HIV topical agents to prevent sexual transmission of HIV³³ ➤ Supports increasing Federal appropriations for science-based HIV prevention programs to no less than \$1 billion annually³³ ➤ Supports comprehensive sex education that is age-appropriate³⁵ ➤ Supports legislation to lift the ban on Federal funding for needle exchange³⁵ ➤ Supports increased funding for Housing Opportunities for People with AIDS (HOPWA) and other pertinent Federal housing program³⁵ ➤ Pledges to protect the Ryan White Care Act and its 	<p>and Cervical Cancer Treatment Program³¹</p> <ul style="list-style-type: none"> ➤ Released his own HIV/AIDS plan on December 1, 2007 to address AIDS domestically and globally²⁹ ➤ Will appoint a Blue Ribbon Commission on HIV/AIDS, bringing together multiple stakeholders to develop a National Strategy for HIV/AIDS that will enhance coordination and develop a comprehensive strategy for ending the epidemic²⁹ ➤ Signed 08stopaids.org "Presidential Pledge for Leadership on Global AIDS"³² ➤ Ensure a dedicated funding stream for comprehensive, age-appropriate, and science-based sex education²⁹ ➤ Supports legislation to lift the ban on Federal funding for needle exchange²⁹ ➤ Invest \$1 billion a year through the CDC for the development and implementation of evidence-based, culturally appropriate prevention strategies²⁹ ➤ Supports culturally appropriate outreach programs to help reduce stigma and other barriers to HIV testing²⁹ ➤ Supports increased funding for Housing Opportunities for People with AIDS (HOPWA) and other pertinent Federal housing program²⁹ ➤ Fully fund the Ryan White CARE Act to end waiting lists for HIV/AIDS medications and
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			<p align="center">multifaceted services³⁵</p> <ul style="list-style-type: none"> ➤ Bring Medicaid coverage to low income, HIV+ Americans through Early Treatment for HIV Act³⁵ ➤ Supports JUSTICE Act to help prevent transmission of HIV among incarcerated populations³⁵ ➤ Reauthorize PEPFAR when it expires in 2008 and rewrite much of the bill to ensure that best practices drive funding for HIV/AIDS programs³⁵ ➤ By 2012 will increase PEPFAR by providing at least \$1 billion a year in new money to expand the program to Southeast Asia, India, and Eastern Europe³⁵ ➤ Will dedicate as much funding to HIV/AIDS as possible (without cutting into other critical foreign assistance programs) to ensure a comprehensive fight against this global pandemic³⁵ ➤ Ensure that poor countries are able to develop the health care infrastructure necessary to prevent and treat HIV/AIDS, promote basic health care, reduce the spread of malaria and TB, and prevent and contain other possible pandemics³⁵ ➤ Supports the rights of sovereign nations to access quality-assured, low-cost generic medication to meet their public health needs³⁵ ➤ Supports the repeal of the ban against people who are HIV+ 	<p align="center">supportive services²⁹</p> <ul style="list-style-type: none"> ➤ Supports the Early Treatment for HIV Act, which expands Medicaid for HIV+ individuals³³ ➤ Supports JUSTICE Act to help prevent the transmission of HIV among the incarcerated population³³ ➤ Commit at least \$50 billion by 2013 to the global fight against HIV/AIDS to help reach the goal of doubling the number of HIV-positive people on U.S.-sponsored treatment and cut by 50% the number of malaria cases and deaths from tuberculosis²⁹ ➤ Ensure that HIV/AIDS programs address violence against women and girls with culturally relevant prevention and treatment programs²⁹ ➤ Implement trade policies that grant developing countries access to lower-cost generic versions of lifesaving medications for HIV/AIDS, tuberculosis, and other major public health problems²⁹ ➤ Supports the Microbicide Development Act, which creates an office within the NIH dedicated to the discovery and development of anti-HIV topical agents to prevent sexual transmission of HIV³³ ➤ Supports the repeal of the ban against people who are HIV+ entering the U.S. as travelers or immigrants and barring those people who are HIV+ in the U.S. from legalizing their
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**CHART #2: SIDE-BY-SIDE COMPARISON OF 2008 DEMOCRATIC CANDIDATES' HEALTH PLANS
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			entering the U.S. as travelers or immigrants and barring those in the U.S. who are HIV+ from legalizing their immigration status ³³	immigration status ³³ ➤ Ensure that all U.S. HIV/AIDS programs are linked with other health, development, and anti-poverty programs ²⁹
Special Disease Initiatives: Autism	No information found	No information found	<ul style="list-style-type: none"> ➤ Support Americans with Autism²³ ➤ Increase funding for the Individuals with Disabilities Education Act²³ 	➤ Increase research on autism ³⁶
Public Health Preparedness Initiatives	No information found	No information found	<ul style="list-style-type: none"> ➤ Governments at all levels should lead the effort to develop a national and regional strategy for public health and align funding mechanisms to support implementation⁶ ➤ Optimize organization of the existing 3000 health departments in the nation⁶ ➤ Support collaborative arrangements between all levels of government and in private sector partners, establish performance and accountability indicators, integrated and interoperable communication networks, and disaster preparedness and response programs⁶ ➤ Examine agricultural, educational, environmental and health policies to assess their effects on public health⁶ ➤ Modernize public health infrastructure, particularly public health laboratories⁶ 	➤ Increase preparedness for natural and man-made disasters ¹⁴
Global Health	No information found	No information found	<ul style="list-style-type: none"> ➤ Increase U.S. contributions to the Global Fund for AIDS, TB, and Malaria³⁵ ➤ During first year of his presidency, proposes to 	➤ Achieve international goals for TB treatment and prevention as described in the U.S. endorsed Global Plan to Stop TB 2006-2015 ²⁹

**CHART #2: SIDE-BY-SIDE COMPARISON OF 2008 DEMOCRATIC CANDIDATES' HEALTH PLANS
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			<p>establish a \$2 billion global education fund³⁴</p> <ul style="list-style-type: none"> ➤ Double U.S. foreign assistance to \$50 billion per year to meet the Millennium Development Goals, including halving the number of people who die of TB and/or are affected by malaria³⁵ ➤ Target new funding toward strategic development goals, including helping developing nations build healthy and educated communities, reduce poverty, develop markets, and generate wealth³⁵ ➤ Improve coordination of trade and development policies to use America's economic power to help developing nations benefit from the global trading system³⁵ 	<ul style="list-style-type: none"> ➤ Over his first term will increase bilateral TB spending by \$2.2 billion for a scale-up of treatment²⁹ ➤ Invest \$8 billion in training health care workers abroad²⁹ ➤ Will launch a multilateral Marshall Plan to help African nations strengthen³⁴
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** For detailed information on the Presidential candidates' health information technology plans, please see [U.S. Presidential Candidates' Health Plans: Incorporating Information Technology to Provide 21st Century Care](#) By Susan Blumenthal, M.D. et al.

*** For detailed information on the Presidential candidates' medical and scientific research plans, please see [U.S. Presidential Candidates' Health Care Plans: Scientific and Medical Research Proposals](#) by Susan Blumenthal, M.D. et al.

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**** For detailed information on the Presidential candidates' HIV/AIDS plans, please see [U.S. Presidential Candidates' Health Care Plans 2008: HIV/AIDS Proposals -- A Time for Leadership](#) by Susan Blumenthal, M.D. et al.

While efforts have been made to make these charts on the Presidential candidates' proposals on HIV/AIDS as comprehensive as possible, this information is intended to be used as a non-partisan reference only and does not necessarily represent the opinions of sponsoring organizations.

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