

From: Diane Rovai  
Sent: Wednesday, August 30, 2006  
To: AHRQ Citizenshealth  
Subject: Comments on Citizens Health Care Working Group Recommendations

The Independent Living Resource Center San Francisco (ILRCSF) is a non-profit organization whose core values include choice, consumer leadership, full access to and inclusion in the community. We serve people with all types of disabilities by providing direct services and educating the community. Health care is an extremely important issue to the consumers we serve. In general we need the issues of physical access and informational access to be part of any health care plan developed.

Comments on Recommendation 1:

- We cannot support anything that talks about or is based on income
- This continues a dysfunctional system of subsidizing low-income people
- Medicare is set up well because everyone receives the same benefits
- "Very high" needs to be defined
- Procedures need to be developed for how "required" coverage would be managed
- Ongoing disability- and health-related expenses need to be taken into account when calculating income

Comments on Recommendation 2:

- "Public/private" - we are concerned about "Halliburton" type contracts being awarded
- When the government has administered health care costs have been significantly lower - how will this work in public/private partnerships?
- We propose that the Federal government offer tuition free medical school to people who agree to go into primary care for a specific number of years
- Electronic health care records need HIPPA-type safeguards providing confidentiality - a parallel system needs to be developed

Comments on Recommendation 3:

- Any plan needs to include lower rates negotiated by the government
- Evidence-based needs to be defined
- Fraud and waste needs to be defined and also be evidence-based
- Quality care and assistive technology - different definitions of "medical need" needs to be developed
- Access to facilities, equipment and services needs to be included

Comments on Recommendation 4:

- We need assurances that sufficient services and supports will be in place that allow people to live not just allowing people to die

Comments on Recommendation 5:

- This is different from having a right to all types of health care
- Affordable needs to be defined
- The plan needs to be based on cost-benefit not cost-effective thinking

Comments on Recommendation 6:

- There needs to be different core benefit packages for people with different needs - for example: diabetics, 20 year old athletes, etc.

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