

May 26, 2009

Senator Max Baucus
Chairman
and
Senator Chuck Grassley
Ranking Member
Senate Committee on Finance
Via e-mail: Health_Reform@finance-dem.senate.gov

Re: Comments on the Policy Option Paper #3: Financing Comprehensive Health Care Reform: Proposed Health Systems Savings and Revenues

Dear Senators:

The National Association of Social Workers (NASW) is the largest professional social work organization in the nation with 150,000 members. NASW promotes, develops, and protects the provision of effective social work services to a diverse group of client populations, many of whom participate in health care programs within the jurisdiction of the Finance Committee. We wish to commend your efforts to reform our nation's broken health care system and note that we are prepared to strongly support congressional efforts aimed at meaningful health system reform. NASW is pleased to provide comments on the Finance Committee's Health Reform Policy Options paper on Financing Comprehensive Health Care Reform.

In general, NASW supports revenue policies for health care reform that adequately invest in our nation's health, recognizing that our economic well-being derives from the good health of our residents. Social workers have long fought to protect the most economically vulnerable such as children, single parents, older adults, racial and ethnic minorities, people with disabilities and others who are least able to finance their health care needs. Social workers support equitable revenue policies that build a universal system of care, financed based upon ability to pay. In particular, NASW supports federal revenue measures that help to narrow gaps in the resources available to people at different income levels.

Following are our comments:

Physician Payments (page 9)

The Committee proposed the establishment of an expert panel to assist CMS in evaluating and adjusting Part B payments for potentially misvalued-physician services. NASW supports creation of such an advisory group, but we note that critical clinical social work services are

included under the physician fee schedule, which are greatly undervalued by CMS. Therefore, we cannot support this proposed advisory group unless it is broadened to include representation of all covered Part B providers, including clinical social workers.

Exclusion of Employer Provided Health Benefits (page 18)

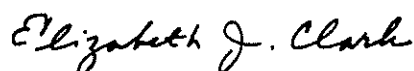
NASW rejects the Committee's proposal to tax the value of employer provided health coverage. We believe the unintended consequences of this policy would produce substantial and unnecessary pressure in the marketplace to reduce health benefits and employer contributions to the health insurance system. Alternatively, NASW supports more progressive tax policies to finance health coverage that would not place unintended pressure on the reformed system to reduce coverage or services.

Limitation on Qualified Medical Expenses (page 23)

NASW rejects the Committee's proposals to limit the definition of medical expenses for purposes of employer plans. We believe the unintended consequences of this tax policy would produce substantial and unnecessary pressure on consumers to reduce health expenditures. Alternatively, NASW does support more progressive tax policies to finance health coverage that would not place unintended pressure on the reformed system to reduce benefits.

Last, NASW advocates for broad financing policies and political choices that reduce income disparities in access to essential health care services in our nation. Health care reform will only be successful when poverty, race, health conditions and other social factors no longer produce vast disparities in access and affordability of care for our nation's residents. NASW greatly appreciates the opportunity to work with you and your staff to address these critical changes necessary in the nation's health care system.

Sincerely,



Elizabeth J. Clark, PhD, ACSW, MPH
Executive Director