

The ACA and Beyond:
Health System Change to Improve
Quality and Value

2010 Annual Report



National Coalition on Health Care
and NCHC Action Fund

From the President and CEO



The period between June 2009 through December 2010 was one of the most important ever in the history of America's health care system. The 2010 Annual Report of the National Coalition on Health Care (NCHC)¹ and NCHC Action Fund (Action Fund)² outlines both organizations' work on policy analysis, advocacy and capacity building activities through the contentious debates leading to the passage of milestone legislation and towards building a better system.

NCHC and the Action Fund worked hard for critical health system reforms, and that work made a significant impact. When President Obama signed into law the Patient Protection and Affordable Care Act (ACA), the law, while not without flaws, was

better for the work NCHC and the Action Fund did during the months leading up to March 23, 2010. Indeed, both organizations continue to fight for needed improvements and lasting reforms.

As the broadest and most diverse coalition working for health system change, NCHC helped diverse stakeholders advance shared goals in a debate that too often devolved into division and rancor. And in the months since the enactment of the ACA, NCHC and the Action Fund have continued this work, building the public consensus necessary to address critical health system issues including cost-containment, access, the needs of underserved communities and health quality and equity.

The annual report outlines this extraordinarily exciting time in the life of our Coalition, as well as the country. I hope you find it informative, and I look forward to building, with you, an American health system that is sustainable, affordable and fair.

Ralph G. Neas

¹ A non-profit, tax exempt 501 (c)(3) organization.

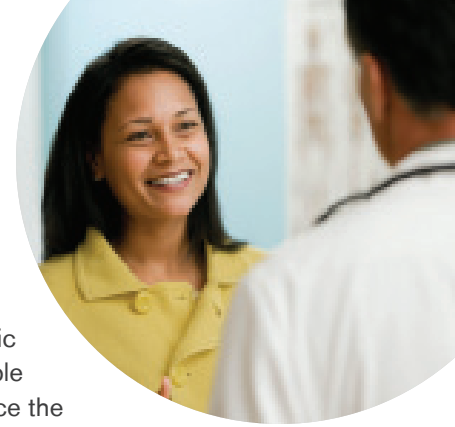
² A non-profit 501 (c)(4) organization.

Accomplishments

The year 2010 was a historic year for America's health care system. On March 23rd, President Obama signed the Patient Protection and Affordable Care Act (ACA), the most significant health care legislation in at least four decades, into law.

Throughout the health reform debate, NCHC and the Action Fund focused its public education and policy advocacy message on the need for comprehensive, sustainable health system reform. In 2009 and 2010, the Coalition was able not only to influence the national reform debate but also to strengthen strategic partnerships and increase the reach of our voice through membership growth, media appearances and direct communication with the public.

Today, the Coalition is engaged in a national effort to educate the public and policymakers about the necessary steps to achieve a health system that is sustainable, affordable and fair. Since lasting leadership is needed to navigate the complex challenges of health system reform at the local, state and national levels, the Coalition is working with key organizations at the state and local level to strengthen multi-stakeholder collaboration, as well as to increase related civic engagement. To make it all possible, the Coalition is continuing to build its resources and profile through membership growth, strategic partnerships and an increasingly prominent profile in the media.



Release of NCHC White Paper on Cost Containment:

Augmenting the NCHC Principles and Specifications, the White Paper gives a more detailed and selective set of policy recommendations on cost-containment and quality improvement which are politically viable, fiscally realistic and potentially scoreable by the Congressional Budget Office (CBO), supported by a strong consensus of the Coalition, and likely to earn the bipartisan support needed for enactment and effective implementation.

from the goal of comprehensive reform in January 2010, NCHC Action Fund convened four major national coalitions for a press conference calling on Congress and the administration to keep working toward comprehensive health system reform.

NCHC California Leadership Forum:

As part of its efforts to support state-level public education and consensus development, NCHC convened a diverse range of stakeholders to discuss the next steps toward health system reform in the nation's largest state.

Launch of the NCHC Action Fund:


As the federal health reform debate heated up, the NCHC Action Fund was launched to fight for the enactment of health system reforms that would be sustainable, affordable and fair.

Alliance for Health Cost Containment:

In December 2010, NCHC convened a new Alliance that includes businesses, labor, consumer advocates, health care providers and health industry leaders which have united to develop system-wide solutions that improve value and curb health costs.

A Pathway to Enactment:

When many in Washington called for a retreat



Governance: New Leadership at NCHC

As the ACA moved toward passage and the Coalition began to plan for the future, the Board of Directors identified the need for a new generation to lead the Coalition through the challenges of implementation. In January of 2010, the founder and then President, Henry E. Simmons, retired after over 20 years of service, and Ralph G. Neas assumed the role of President and CEO of NCHC. In July 2010, Co-Chairs of the NCHC Board, Congressman Bob Edgar, President and CEO of Common Cause, and the Honorable Bob Ray, former Governor of Iowa, stepped down and the Board elected John D. McArthur, Dean Emeritus of the Harvard Business School, as Chairman of the Board of Directors.

Shaping the Conversation: NCHC and the National Health Care Reform

The Legislative Debate

As the 111th Congress convened in 2009, there was little doubt that health care would be a major issue. Over the next two years, NCHC engaged opinion leaders, the public, press, providers and policymakers in making the most of this opportunity.

Throughout the lengthy national debate, NCHC and the Action Fund maintained a constant drumbeat in the press regarding the importance of truly comprehensive reform, which would rein in the cost of health care, bring coverage within reach of all, simplify the administration of health care, improve quality and be financed equitably. The Coalition developed objective

analyses and educational materials pertaining to the competing proposals and strategies compared to NCHC's Principles for Reform. (See educational resources including side-by-side comparisons of bills, talking points and templates at www.nchc.org and in the NCHC members-only collaborative space.)

Weekly meetings of the Coalition's Steering Committee offered staff, member organizations and allies a chance to strategize, coordinate and report on the developments of the debate. The Coalition conducted extensive outreach to and education with its own membership, as well as a range of other critical voices in the debate, including:

- » Administration representatives (including high ranking White House, OMB and HHS officials);
- » Congressional Blue Dogs, Leadership, Members of both the US House and Senate and committee staff;
- » Good government and consumer groups (League of Women Voters (LWV), U.S. PIRG, Consumers Union, AARP, etc.);
- » Academics, think tank and health policy research and advocacy groups;
- » Corporate and labor leaders (including The Business Roundtable, Verizon, AT&T, Wal-Mart, SEIU, CWA, AFSCME, IBEW, AFL-CIO and others);
- » Civil Rights, disability rights, women's and minority organizations;
- » Medical societies, disease groups and other health care-related service provider associations; and
- » Other major coalitions engaged in the health care debate.





The White House launched its drive for health care reform with a press conference where key health industry players committed to trillions in reductions in health care costs, and key policy makers spoke openly of passing bipartisan reforms within a few months. At the time, consistent with its Specifications for Reform, the Coalition praised the intent to offer coverage for all and stakeholders' promises to rein in costs, but noted the need for real policy change to make the health system both more effective and more affordable.

By the summer, prospects for the quick passage of comprehensive health system reform became uncertain. Congressional leaders expressed both in the press and directly to the Coalition a need for policy options which could translate those voluntary commitments from the industry leaders into concrete approaches to improving quality and constraining costs. Responding to that need, the Coalition convened its own intensive policy development and consensus building process. For four months, NCHC's participating organizations ranging from the consumer and disability advocates, labor organizers, health care providers to business and payer groups, sat at the same table, crafting a common approach to enforceable, system-wide cost containment. This process produced a landmark NCHC white paper, *Containing Costs and Avoiding Tax Increases While Improving Quality: Affordable Coverage and High Value Care*. This twenty page document outlined a detailed set of system-wide cost containment and

quality improvement recommendations, intended to make policies to increase access to care and increase the affordability of coverage sustainable over the long-term.

Coalition staff and representatives of its participating organizations built on the collaborative efforts which produced the white paper, continuing to stress to policy-makers and the press how essential robust cost management, health care quality initiatives and equitable financing would be to sustaining comprehensive health system reform.

In October of 2009, the Action Fund, a 501(c)(4) organization, was created. An affiliated organization, the Action Fund was established to support the public education and advocacy work of the Coalition.

Among its first activities were a set of advertisements in targeted national media outlets, placed as reform legislation reached the floor of the House of Representatives and then the Senate. Referred to as the "Burning House Ad," the piece updated a historic ad by the Coalition and likened reform without cost control to moving furniture into a burning house. The ad was sent to thousands of journalists, members of Congress, and public interest organizations.

In December 2009, the Action Fund unveiled an innovative new policy approach, the system-wide failsafe mechanism, designed to encourage improved quality and lower health system costs—

Earned media

Earned media and public appearances are an integral part of NCHC strategy to educate the public on the need for health system change. During late 2009 and 2010, NCHC made appearances on, authored, or was directly quoted in its reports and materials cited in more than 350 sources including pieces in the New York Times, LA Times, Washington Post, CBS “*Sunday Morning*,” Associated Press (AP), Sacramento Bee, USA Today, Christian Science Monitor, Daily News, Roll Call, The Hill, National Journal, Boston Herald, CNN, CNBC and many other traditional media outlets. One AP story ran in over 200 publications. President and CEO Ralph Neas was interviewed – often on background – more than sixty times over the course of the legislative battle. NCHC directly shaped or influenced at least 35 other media reports and opinion pieces often providing reporters with ideas or data for stories during this time.

In addition to publishing a number of op-eds in numerous traditional and on-line venues, senior staff had discussions with the editorial boards of key major media outlets including, among others, the Washington Post, New York Times, Politico, Roll Call, and the National Journal. Regular blog postings in the Wall Street Journal, the National Journal and The Huffington Post continue the drum beat of system-wide change and cost containment.

while protecting the most vulnerable citizens. (See Dec. 7, 2009 Roll Call, “Congress, Tackle Systemwide Cost in Health Reform” by Henry E. Simmons and Ralph G. Neas.)

Following the near-derailment of health reform following the Massachusetts Senate election, the press event organized by the Action Fund urged Congress and the administration to continue working towards comprehensive health system reform. The Coalition was joined by fellow advocates to put aside differences and publicly embrace a common path to move the enactment of comprehensive reform forward – the very path it took to get the bill signed into law.

In January 2010, special election voters in Massachusetts sent Senator Scott Brown to the U.S. Senate, threatening to derail the prospects for comprehensive reform. Officials on the Hill and in the administration immediately began to suggest piecemeal alternatives

to comprehensive reform. The Coalition’s Steering Committee, in a quickly arranged meeting following these developments, concluded that the Coalition must stand behind its commitment to comprehensive approaches to reform. With the interrelated and independent nature of the health system, America could not wait another decade for comprehensive solutions.

NCHC Action Fund organized a press conference on January 27, 2010, hosted by the American College of Cardiology (ACC), to respond to the new challenge presented by the political climate in the Senate. Entitled “A Pathway to Enactment,” the press-conference was joined by Coalition partners and allies such as Ron Pollack, Executive Director of Families USA; Richard Kirsch, National Campaign Director of Health Care for America Now (HCAN); Mary Andrus, representing Easter Seals



and the Consortium for Citizens with Disabilities; Jack Lewin, CEO of the American College of Cardiology; Terry Gardiner, Vice President of Policy and Strategy of the Small Business Majority; Brent Wilkes, National Executive Director of the League of United Latin American Citizens (LULAC); and Mary Wilson, President, League of Women Voters of the United States. A watershed moment for advocates of reform, the message was heard loud and clear.

In less than a week, the Coalition built common ground for strategic action with a range of other health care coalitions and groups. Over a period of several weeks, the Coalition launched an intensive communications and strategic policy advocacy effort, conducting a range of additional briefings, meetings, press appearances, web and social media postings. With the efforts of NCHC, advocates across the country, and leading policy-makers, momentum grew once again for comprehensive reform. On March 23rd, 2010, President Barack Obama signed into law legislation which, while not without flaws, did take several steps toward NCHC's goal of comprehensive health system reform.

Health System Reform After the Affordable Care Act

Following the final enactment of the two bills now known as the Affordable Care Act (ACA), many Americans were confused and misinformed about how the law would affect their lives and work, about who would be helped by health reform and how it would be financed. Even some elected officials were unclear on the law's provisions. So the Coalition shifted its energies into a national public education campaign.

The Coalition built new strategic relationships to address these challenges. Working collaboratively with Coalition member organizations and other key partners, such as the Herndon Alliance and Third Way, the Coalition helped to develop and issue a variety of tools including:

- » A National Scorecard measuring ACA against the Coalition's Specifications for Reform and white paper on cost-containment;
- » Templates on how to respond to attacks on the ACA;

- » State-specific Talking Points targeted towards diverse audiences including:
 - » "What's in the Health Reform Law for Consumers"
 - » "What's in the Health Reform Law for Small Businesses"
 - » "What's in the Health Reform Law for Seniors"
 - » "How does the Health Reform Law Lower Costs?"
 - » "How will the Health Reform Law Impact Your Medical Practice?"
- » A new website at <http://nchc.org/state-reform> for use by partners providing:
 - » State-specific resources and technical assistance to California-based partners,
 - » Templates for use in California policy and advocacy work and
 - » California organization contact information.

National health care reform without cost control

Of every dollar spent by Americans on health care, thirty to forty cents go to waste. Money wasted on unnecessary medical tests, excessive profits and administrative costs continues to make health care unaffordable for more middle-class families every day. American workers and employers are paying more for less health coverage and lower quality care. Without better cost control, escalating health expenditures will bankrupt more individuals, families and businesses, as well as government at every level.

Without better cost control, America's health system will waste

- \$230,000 dollars every second...
- \$800 billion dollars annually...
- \$10 trillion dollars in the next decade

The National Coalition on Health Care and NCHC Action Fund applaud the progress made by Congress and the President with the Patient Protection and Affordable Care Act. This was an important first step toward long overdue health system reform. But Congress, the states and every responsible citizen must act now on a bipartisan basis to strengthen system-wide cost control while protecting the health care safety net for the truly needy. Without better cost control, the recent price spike will be exceeded by the flames of rising costs and declining access.

The National Coalition on Health Care and NCHC Action Fund are working with doctors, nurses, business, consumers, health industry leaders, unions, and advocates for both the middle-class and vulnerable populations, to achieve cost savings for both the public and private sectors. If you agree that fair and responsible cost control must be part of America's health system, please go to www.nchc.org or www.NCHCActionFund.org.

Call Congress and your state officials to get politics aside.

Call Congress and your state officials to get responsibility to act responsibly to make America's health system sustainable, affordable, and fair by implementing system-wide cost control.

is like moving furniture into a burning house.

NCHC Action Fund

The NCHC Action Fund is a 501(c)(4) not-for-profit organization devoted to public education, and advocacy to secure viable, affordable health care for all Americans. Our national and state-level campaigns are committed to creating and maintaining health system reform, as a 501(c)(3) organization NCHC has received a charitable contribution in January 2010. With our website at www.nchc.org, 1000 Main Ave., Washington, DC 20005, phone (202) 638-7111.

Published in the Washington Post on November 9, 2009 and in Politico, CQ/Roll Call and The Hill on November 5 and 17, 2009.

We provided the information on our website, shared it with allied organizations and held informational meetings to disseminate the resources.

Where the Rubber Hits the Road: Health System Reform in the States

While working aggressively for health system reform in Washington, DC, the Coalition continued to prioritize its consensus development and public education activities at the state level. A key focus was strengthening efforts on behalf of health system reform in California, a state which has often served as a policy leader in the past. With support from The California Endowment Foundation, the Coalition worked to ensure that the reform priorities of California businesses were prominent in the media and legislative debates. The Coalition, working with California Public Interest Group (CalPIRG) and a range of other organizations, reached deep into California's advocacy community to broaden the voices involved in the debate around health system reform.

These efforts culminated in a successful NCHC Leadership Forum, held at the University of Southern California on September 29, 2010. The forum brought together a diverse mix of California organizations, which had not routinely worked together, to help identify common ground and resources for addressing health reform

implementation, policy and public education challenges. The event also provided a platform for multiple stakeholders to coordinate plans, share tools and resources, study effective messaging and develop new strategic alliances.

Key national partners in our California work included the Asian Pacific Islander American Health Forum, Children's Defense Fund, Consumers Union, League of Women Voters, National Council of La Raza, Japanese American Citizens League, Organization of



Chinese Americans, National Physicians Alliance, Partnership for Health Care Reform (a partnership including Verizon, CWA, and IBEW), CalPERS, CalSTRS, US PIRG and Small Business Majority, as well as several California groups, such as: California Immigrant Policy Center, California Partnership, Children's Hospital LA-LA Healthcare Alliance for Children, Insure the Uninsured Project, and LA Health Action.

The California outreach and the partnerships built during this period will serve as the foundation for a longer-term effort to support building state and regional capacity to achieve necessary health system reform in California and other states. A top priority will be ensuring the promulgation and implementation of policies, which encourage proven prevention and wellness programs and ameliorate health disparities.

Building Consensus

With so much at stake in the health care debates in 2009 and 2010, the Coalition intensified our outreach to new partners, with the aim of harnessing and incorporating a broad set of perspectives as the nation crafts a path toward an affordable, sustainable and equitable health care system.

Membership Development

In 2009 and 2010, the Coalition was pleased to welcome several new members.

Adrian Dominican Sisters are an international congregation of over 800 vowed women whose

roots go back to St. Dominic in the 13th century. They are committed to preaching the Word of God, the formation of community centered on faith and ministry to further the values of the Gospel among themselves and in the world. Ministering in more than 30 states, the District of Columbia, the Commonwealth of Puerto Rico and in five countries (Canada, Dominican Republic, Italy, Mexico and Swaziland), they strive to address the needs of the world and to serve where called.

American Library Association (ALA) is an organization that promotes library service and librarianship. As a large employer across the nation, the organization's mission is, "to provide leadership for the development, promotion and improvement of library and information services and the profession of librarianship in order to enhance learning and ensure access to information for all."

Asian & Pacific Islander American Health Forum (APIAHF) is a national health policy organization for Asian Americans, Native Hawaiians and Pacific Islanders (AA and NHPI). Its mission is to advocate for greater recognition, inclusion and engagement of Asian Americans, Native Hawaiians and Pacific Islanders on policies and programs that are critical to the health and well-being of these diverse and vibrant communities.



Children's Defense Fund (CDF) is the foremost national proponent of policies and programs that provide children with the resources they need to succeed. CDF champions policies that will lift children out of poverty, protect them from abuse and neglect, and ensure their access to health care, quality education, and a moral and

spiritual foundation. From its inception, CDF has challenged the United States to raise its standards by improving policies and programs for children. Over the years, CDF has become known for careful research on children's survival, protection and development in all racial and income groups and for independent analyses of how federal and state policies affect children, their families and their communities. CDF has influenced the child policy agenda.

CWA-IBEW-VERIZON Labor Management Partnership and Fund for Health Care Reform- CWA, IBEW and Verizon formed a partnership to help find solutions to the health care crisis, agreeing that problems like increasing costs and quality of care can't be solved at the bargaining table. The three bargaining partners decided to expand their reach by founding the Bridge Years Health Coalition. Members of the coalition include AFL-CIO, Alliance for Retired Americans, the National Coalition for Health Care, Small Business Majority and others.

Evangelical Lutheran Church in America (ELCA) is a community of faith that shares a passion for making positive changes in the world. With faith built around a strong belief in God as made known to us in Jesus Christ, they are a group of spiritual leaders. Through worship, service and education, they practice with nearly 10,500 congregations across the U.S., Puerto Rico and the Virgin Islands, and nearly five million members.

Midwest Business Group on Health (MBGH) is a Chicago-based group founded in January 1980 by a small group of large Midwest employers to help employers and their population obtain more value from their health care benefit dollars. Today, MBGH is one of the nation's leading business groups of private and public employers. MBGH's 100 plus members cover over 2 million lives, spending greater than \$2.5 billion on health care benefits. As a nonprofit, 501(c)(3) organization, MBGH offers employers a variety of health benefit educational seminars, networking opportunities and quality health benefits projects. In the Chicago area, MBGH works with all segments of the local health care industry to improve the quality and safety of health care services and to find workable solutions to common problems of the community.



National Association of Community Health Centers (NACHC) depends in large part on public financial help and need a unified voice and common source for research, information, training and advocacy. NACHC was organized in 1971 and works with a network of state health center and primary care organizations to serve health centers in a variety of ways:

- » Provide research-based advocacy for health centers and their clients.
- » Educate the public about the mission and value of health centers.
- » Train and provide technical assistance to health center staff and boards.
- » Develop alliances with private partners and key stakeholders to foster the delivery of primary health care services to communities in need.

year in 41 states, Puerto Rico, and the District of Columbia. To achieve its mission, NCLR conducts applied research, policy analysis, and advocacy, providing a Latino perspective in five key areas — assets/investments, civil rights/immigration, education, employment and economic status, and health. In addition, it provides capacity-building assistance to its Affiliates who work at the state and local level to advance opportunities for individuals and families.

National Rural Health Association (NRHA) is a national nonprofit membership organization with more than 20,000 members. The association's mission is to provide leadership on rural health issues. NRHA membership consists of a diverse collection of individuals and organizations, all of whom share the common bond of an interest in rural health.

New Strategic Partnerships

The Coalition began a series of strategic partnerships in 2009 and 2010 that are likely to be critical to achieving the goal of a sustainable, affordable and equitable health care system. As the health reform debate continued, the Coalition's leadership established a new Alliance with strategic partners, including corporations, insurance companies, consumer groups, pension funds,



The National Council of La Raza (NCLR) is the largest national Hispanic civil rights and advocacy organization in the United States working to improve opportunities for Hispanic Americans. Through its network of nearly 300 affiliated community-based organizations (CBOs), NCLR reaches millions of Hispanics each

and labor unions, to promote policies to bend the cost curve. Despite their differences, the Coalition brought these organizations together in advocating for a system-wide approach to restraining health cost growth. They bring a variety of perspectives to the policy process but share a common interest in curbing health costs for their businesses, employees and the health system as a whole, while improving the quality of care and protecting the most vulnerable. The Coalition and Alliance are in the process of beginning a multifaceted campaign centered on a groundbreaking national research project to identify cost trends and drivers of increased health spending. These partnerships have helped and will continue to help amplify the Coalition's message and advocacy efforts.

Paul G. Rogers Memorial Scholars Program

July 2009 – December 2010



In the Summer of 2009, the Coalition officially launched the Paul G. Rogers Memorial Health Policy Analysis and Advocacy Scholars Program. The program is named in honor of the Coalition's longtime colleague and distinguished health care advocate Paul G. Rogers, Co-Chair of the National Coalition on Health Care's Board of Directors from 1990-2008. This important new professional development program offers unpaid, full-time internship positions with NCHC to premiere graduate and law school students and young professionals. It is designed to train the next generation of policy advocates, giving them an opportunity to engage actively in the health policy debate and have a hand in the formation and implementation of America's health legislation, while learning about nonprofit management.

Admission to the Scholars Program has proven highly competitive, allowing the Coalition to benefit from the skills and knowledge of some exceptional young health policy professionals. Averaging an acceptance rate of 10%, the applicant pool is full of future leaders in the field of health law, policy and social justice. Each class is selected to hold a variety of educational, geographic and cultural backgrounds in order to add to the learning dynamic of each associate.

Since the program's inception, the Rogers Scholars have both assisted staff in the Coalition's ongoing activities and spearheaded individual projects related to their degree work. An illustrative sampling is listed below:

- » Compliance and Corporate Governance Briefing
- » Rural Health Resources Database
- » Generic Pharmaceuticals and "Pay-for-Delay" Briefing
- » Rogers Scholars' Blog

“ I would recommend any law or public policy student to apply for a Rogers Scholar position.

-Rafael Roberti, JD, American University

[NCHC] has a true coalition membership who is playing a critical role in the effort to achieve affordable, fiscally responsible, and sustainable health care for America.

- Joy Twesigye, MPH, Johns Hopkins University

The National Coalition on Health Care has given me not only unique opportunities, but great opportunities for mentoring and increasing my knowledge in health law and politics.

-Selena Hunn, JD, Loyola University

Looking Ahead

The Next Steps Toward A Sustainable Health System: Leveraging the Budget Debate

The rapidly evolving national debate has been increasingly focused on the cost of federal entitlement programs. The Coalition supports fiscal solutions which rein in the cost of health care system wide, instead of merely shifting costs to consumers, businesses or local governments and harming the nation's most vulnerable citizens. In late 2010, Coalition member organizations, staff and representatives of our strategic partners met with the President's National Commission on Fiscal Responsibility and Reform, presenting cost-containment policy alternatives consistent with the Coalition's principles.

The Coalition will remain engaged in the national conversation about fiscal policy urging system wide solutions that protect the most vulnerable. To that end, NCHC has convened an Alliance of leading national organizations and will soon launch a major national initiative, A Prescription for Improving Value and Curbing Health System Costs. The initiative's cornerstone will be the creation of

groundbreaking national health system cost and quality databases by the Center for Studying Health System Change and Dr. Paul Ginsburg, and related analyses of health cost growth, quality and value across the public and private sectors.

Using these diagnostic tools, NCHC will help reset the debate over health system costs and engage consumers, providers, and business leaders in developing workable solutions for curbing health cost growth.

Building Partnerships to Put America's Health Care on a Path to Sustainability

Moving forward, the Coalition will deepen its work with our existing member organizations and expand the Coalition. Bi-monthly NCHC steering committee meetings and outreach to other allies will continue to allow the Coalition to share information, develop consensus around policy goals and plan effective joint action.

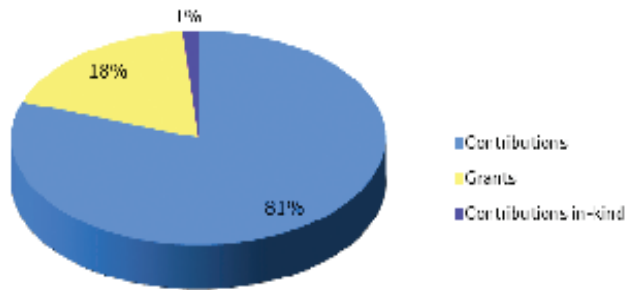
Additionally, the Coalition will work to build strategic partnerships with a broad range of organizations and leaders, who share the Coalition's policy goals and the conviction that in the face of America's health care challenges, there can be no single vested interests, only collective concerns.



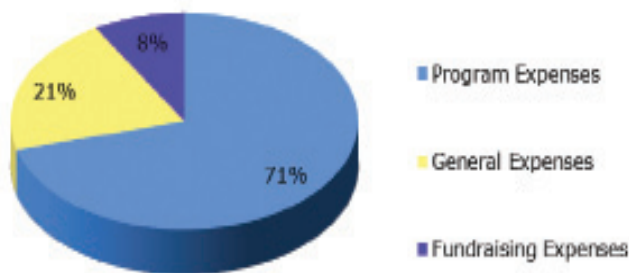
Financial Report for the Year Ended June 30, 2010

Combined Financial Reports NCHC and NCHC Action Fund

OPERATING SUPPORT AND REVENUE	
Contributions	1,537,710
Grants	348,650
Contributions in-kind	25,000
Total operating support and revenue	1,911,360



OPERATING EXPENSES	
Program Expenses	1,028,712
General Expenses	302,196
Fundraising Expenses	123,712
Total operating expenses	1,454,620



The information presented here is drawn from both organizations' audited financial statements and IRS Form 990. NCHC and the Action Fund's independent auditors were Halt, Buzas and Powel, Ltd. Copies of 990s and audited financial statements are available upon request to the offices of NCHC and NCHC Action Fund.

COALITION LEADERSHIP

Honorary Co-Chairs: Former President George H. W. Bush & Former President Jimmy Carter

Chairman: John H. McArthur

Founder and President Emeritus: Henry E. Simmons

President and CEO: Ralph G. Neas

Board of Directors

Robert D. Ray, Former Governor of Iowa, Co-Chair Emeritus

Robert W. Edgar, Former Congressman, President & CEO, Common Cause

Ralph G. Neas, President and CEO, National Coalition on Health Care

Frank Carlucci, Chairman Emeritus, Carlyle Group

Bill Crist, Emeritus Professor of Economics, California State University

George Diehr, Board Member, California Public Employees' Retirement System

Commissioner Israel L. Gaither, National Commander, The Salvation Army

Cheryl G. Heaton, President & CEO, Legacy Foundation

Grace L. Mastalli, Board Secretary, COO & General Counsel, National Coalition on Health Care

John H. McArthur, Dean Emeritus, Harvard Business School

John Rother, Executive Vice President of Policy and Strategy, AARP

John Seffrin, CEO, American Cancer Society

John Sweeney, President, AFL-CIO

John Wilson, Executive Director, NEA

Member Organizations

AARP	Colorado Public Employees' Retirement Association	National Council of La Raza
Adrian Dominican Sisters	Common Cause	National Education Association
AFL-CIO	Communication Workers of America	National Multiple Sclerosis Society
American Academy of Family Physicians	Consortium for Citizens with Disabilities	National Rural Health Association
American Academy of Pediatrics	Consumers Union	New York State Teachers' Retirement System
American Association of Birth Centers	Duke Energy	Organization of Chinese Americans
American Association of Community Colleges	Duke University Medical Center	Partnership for Health Care Reform
American Association of State Colleges and Universities	Easter Seals	Presbyterian Church (U.S.A.)
American Cancer Society	The Episcopal Church	Religious Action Center of Reform Judaism
American College of Cardiology	Evangelical Lutheran Church in America	The Salvation Army
American College of Emergency Physicians	Giant Food Inc.	Sheet Metal Workers' International Association, AFL-CIO
American College of Nurse-Midwives	Gross Electric Inc.	Small Business Majority
American College of Surgeons	Illinois Municipal Retirement Fund	Stop & Shop Inc.
American Council on Education	International Brotherhood of Electrical Workers	Teva Pharmaceutical Industries
American Dental Education Association	International Brotherhood of Teamsters	Union for Reform Judaism
American Federation of State, County and Municipal Employees (AFSCME), AFL-CIO	International Federation of Professional & Technical Engineers, AFL-CIO	United Food and Commercial Workers International Union
American Federation of Television and Radio Artists	International Foundation of Employee Benefit Plans	United Methodist Church – General Board of Church and Society
American Federation of Teachers	Iowa Farm Bureau Federation	United States Conference of Catholic Bishops
American Heart Association	Japanese American Citizens League	U.S. PIRG
American Legacy Foundation	Johns Hopkins Medicine	National Education Association
American Library Association	League of Women Voters	National Multiple Sclerosis Society
American Lung Association	Michigan Health & Hospital Association	National Rural Health Association
Asian & Pacific Islander American Health Forum	Midwest Business Group on Health	New York State Teachers' Retirement System
Association of American Medical Colleges, Council of Teaching Hospitals and Health Systems	Motion Picture Association of America	
Association of American Universities	National Association for the Advancement of Colored People (NAACP)	
Breast Cancer Network of Strength	National Association of Community Health Centers	
C-Change	National Association of Independent Colleges and Universities	
California Public Employees' Retirement System (CalPERS)	National Community Action Foundation	
California State Teachers' Retirement System (CalSTRS)	National Conference on Public Employee Retirement Systems	
Childbirth Connection	National Consumers League	
Children's Defense Fund	National Coordinating Committee for Multiemployer Plans	
CodeBlueNow!	National Council of the Churches of Christ in the USA	
	National Council on Teacher Retirement	



 **NCHC Action Fund**

 **National Coalition on Health Care**

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