Annual Report of the National Coalition on Health Care 2008-2009
This Annual Report is
Dedicated to the Memory of the Honorable
Paul G. Rogers
1921-2008
Co-Chairman of the National Coalition on Health Care
1990-2008
Member of Congress
1955 to 1979
Chairman of the House Subcommittee on Health and the Environment
1971-1979
Visionary Leader

In a 1972 speech at a meeting of the Association of American Medical Colleges Chairman Rogers quoted the Book of Common Prayer saying:

“We have left undone those things we ought to have done; and we have done those things which we ought not to have done; and there is no health in us.”

“Those words,” he continued, “are dramatically precise in describing our national performance in the delivery of health care in this nation.”

Unfortunately, his words are more true today than when first uttered.
# Table of Contents

Background .........................................................................................................................1  
Introduction ................................................................................................................... 5  
Accomplishments 2008-2009 ............................................................................................8  
  Leadership Growth .........................................................................................................8  
  Membership Development ............................................................................................15  
  Membership Engagement .............................................................................................24  
NCHC Public Education and Advocacy Activities ........................................................29  
  New Initiatives .............................................................................................................42  
A Closer Look at NCHC in 2009 ......................................................................................48  
  New Board Member Bios .............................................................................................48  
  Staff Bios .....................................................................................................................52  
Member Organizations and Affiliates ...........................................................................59  
Infrastructure Development and Capacity Building ......................................................77  

© 2009 by the National Coalition on Health Care  
1120 G. Street, NW, Suite 810  
Washington, DC 20005  
www.nchc.org
Background

The National Coalition on Health Care

Founded in 1990 by Dr. Henry Simmons, its current President, the National Coalition on Health Care is the largest, broadest, most diverse coalition working to achieve comprehensive health care reform. It is an alliance of more than 80 organizations representing business, unions, health care providers, associations of religious congregations, minorities, people with disabilities, pension and health funds, insurers, and groups representing patients and consumers. Member organizations collectively represent over 150 million Americans. They speak for a cross-section, and a majority, of our population.

The Board of Directors includes Frank Carlucci, who served several Republican and Democratic Presidents in a range of intelligence, national security, and ambassadorial positions, and Israel Gaither, the National Commander of the Salvation Army. It includes John Sweeney, the President of the AFL-CIO, John Wilson, Executive Director of the NEA, John Rother, Executive Vice President of Policy and Strategy of AARP, John McArthur, Dean Emeritus of the Harvard Business School, Cheryl Healton, President of the American Legacy Foundation, and John Seffrin, CEO of the National Cancer Society. These individuals are leaders who represent organizations playing a major role in our society and in public policy making. Together they represent extraordinary breadth of expertise and resources.

The Coalition is rigorously nonpartisan. Former Presidents George H. W. Bush and Jimmy Carter are our honorary co-chairs. Former Iowa Governor Robert Ray, a Republican, and former Congressman Bob Edgar, a Democrat from Pennsylvania, are its co-chairmen. The Coalition is committed to building a national bipartisan consensus in support for enactment and implementation of sustainable, comprehensive health care reform.
Introduction

A Time of Transition and Transformation:

July 1, 2008-July 31, 2009

The period of time covered by this Annual Report of the National Coalition on Health Care roughly coincides with one of the most tumultuous and dramatic periods of recent American history. The year began as national political campaigns were being played out against a backdrop of two wars, a devastated economy and plummeting confidence about the future. As the election season was heating up, the Coalition issued statements urging candidates of both political parties to support system-wide systemic health care reform. By conveying a clear message of the Nation’s urgent need for reform to both the Republican and Democratic National Committees, NCHC began this, the most eventful year of its history.

Republican Presidential candidate John McCain’s senior policy advisor Dr. Douglas Holtz-Eakin made a presentation at the regular meeting of the whole Coalition in the late spring. Then in September, during the most intense debates of the Presidential election, the Coalition in turn was addressed by former Senate Majority Leader Tom Daschle regarding the Democratic nominee Barack Obama’s health plan. During this period – on October 13, 2008 – the Coalition experienced a great loss with the death of longtime Coalition Board Co-Chairman, the Honorable Paul G. Rogers. It was a time for transition and succession planning.

The Coalition’s founder, CEO and President, Dr. Henry E. Simmons, assisted by several outside advisors and Coalition supporters¹, had already initiated a thoughtful process to identify new funding sources, new members and new additions to the Coalition’s leadership team. With the award of a nearly $400,000 capacity building and advocacy grant from the W. K. Kellogg Foundation in June 2008², member support, and a grant from the American Legacy Foundation, Dr. Simmons and members of the Board of Directors were able to attract a strong new leadership team to bolster the small existing staff. Thus, the Coalition soon had a new Co-Chair

¹ Notably Michael Maccoby, PhD, the President of Maccoby Group and director of Project on Technology, Work and Character, a nonprofit research center. A psychoanalyst, anthropologist, and consultant, he also teaches leadership at Oxford University’s Said School of Business and the Brookings Institution. He is author of bestseller The Gamesman (1976) and author or coauthor of many other books – most recently, the Leaders We Need, and What Makes Us Follow (2008).
² See Abstract in Appendix A
for the Board – the Honorable Robert “Bob” Edgar, several other new Board Members, a new CEO and COO, new donors, many new Coalition member organizations and a number of new staff and interns – all of whom are deeply committed to the Coalition’s mission, public education and policy advocacy program.

Long respected for its pioneering history, strong institutional knowledge and deep expertise about the health care system’s strengths and problems, the Coalition’s role as the pre-eminent national health care alliance had been challenged in recent years by the rise of several more activist 501 (c) (4) grassroots organizations and a surge of related think tank activity. Rather than viewing these new players as competition for limited resources, during this past year the Coalition’s newly augmented leadership team adapted to the changing environment by creating vigorous new networks and partnerships with other non-profits, coalitions, businesses and institutions. This strategy has helped to maximize Coalition impact by boosting its ability to work with and through many other organizations committed to the belief that meaningful health system reform is critical to America’s future.

Building upon the strong foundation of the original NCHC Principles and Specifications for Reform developed in 2005, the Coalition has been able to use the Community Forums, Hill Days and membership development activities supported by the Kellogg Foundation to cultivate new common ground among highly diverse organizations, academics, community leaders and other stakeholders in order to use that common ground as a fulcrum to leverage support for enacting large scale systemic and systematic changes in health care delivery and services. Thus, the return in value on direct support to the Coalition is magnified greatly through the investment and coordination of NCHC members, organizations and affiliates in Washington D.C., and communities across the country.

Today, the Coalition operates on a consensus basis with renewed urgency and recognition that our health care system is dysfunctional and represents an unsustainable drain on our economy as a whole. Now, when America is at an extraordinary moment in history and facing the worst economic crisis in more than seven decades, the Coalition has reshaped itself, refocused its efforts, and renewed its commitment to the future. Driven by shared appreciation of the fiscal and moral imperatives, NCHC is led, staffed and positioned strongly to make a critical difference in achieving sustainable health care system reform.

3 See Appendix B for the Recently Updated Specifications.
Media prognostications, delays and naysayers aside, bipartisan enactment of health care reform is more within America’s reach today than in the past three decades. Engagement in shaping reform to be consistent with the Coalition’s principals and specifications has never been more important.

The support provided for work to improve the prospects of enacting health care reform either directly supported or inspired all of the Coalition’s accomplishments of the past year and shaped its strategy for the critical time ahead.
Accomplishments 2008-2009

Leadership Growth

This year, NCHC added new board members, staff, and membership organizations. Former Congressman Bob Edgar joined the NCHC Board as Co-Chair of the Board of Directors. Other new Board members for 2009 include Dr. Cheryl G. Healton (President and CEO, American Legacy Foundation), John Wilson (Executive Director, National Education Association), and John Rother (Executive Vice President, Policy and Strategy for AARP).

NCHC's Board of Directors

Robert D. Ray (Co-Chair)
Former Governor of Iowa

Robert W. Edgar (Co-Chair)
Former Member of Congress
President and CEO
Common Cause

Henry E. Simmons
President
The National Coalition on Health Care

John Wilson
Executive Director
National Education Association

Frank Carlucci
Chairman Emeritus
The Carlyle Group

Bill Crist
Emeritus Professor of Economics
California State University

George Diehr
Board Member
California Public Employees' Retirement System

Cheryl G. Healton
President and CEO
American Legacy Foundation
Israel L. Gaither  
National Commander  
The Salvation Army  

William J. Grize  
Former President & CEO  
Ahold USA  

John H. McArthur  
Dean Emeritus  
Harvard Business School  

John Rother  
Director of Legislation and Public Policy  
AARP  

John Seffrin  
CEO  
American Cancer Society  

John Sweeney  
CEO  
AFL-CIO  

The Board’s Executive Committee consists of Dr. Simmons, and the Co-Chairs. The Audit Committee is chaired by John H. McArthur.
Membership Growth

NCHC membership is growing and becoming increasingly diverse but remains unified by a common vision. A large number of new organizational members joined the Coalition this year, including National Council of La Raza, Children’s Defense Fund, Consumers Union (CU) and Teva Pharmaceutical Industries Ltd. This expanded membership amplifies the Coalition’s voice in areas of particular interest. The thirty-one organizational members that joined the Coalition this year for the first time, or rejoined after a significant lapse in membership, include:

- American College of Cardiology
- American College of Emergency Physicians
- American College of Surgeons
- American Heart Association
- American Legacy Foundation
- American Lung Association
- Asian Pacific Islander American Health Forum
- Association of American Medical Colleges and Teaching Hospitals
- Breast Cancer Network of Strength
- C-Change
- Children’s Defense Fund
- Colorado Public Employee Retirement Association
- Common Cause
- Consortium for Citizens with Disabilities
- Consumers Union
- Council on Teaching Hospitals
- Duke University Medical Center
- Easter Seals
- Japanese American Citizens League
- Johns Hopkins Medicine
- League of Women Voters
- Michigan Health & Hospital Association
- National Association for the Advancement of Colored People (NAACP)
- National Community Action Foundation
- National Council of La Raza
- National Multiple Sclerosis Society
- Organization of Chinese Americans
- Small Business Majority
- Teva Pharmaceutical Industries
- U.S. PIRG
- Verizon (Partnership for Health Care Reform)

American Legacy Foundation

In addition to joining the Coalition and accepting a seat on the Board of Directors, the American Legacy Foundation has provided significant grant support to NCHC pursuant to an agreement executed on January 13, 2009. As a result, NCHC has been able to sharpen its focus on improving prevention by reducing tobacco use and policy advocacy to assure the inclusion of cost-effective evidence based smoking cessation services in health coverage. Special attention is given to this issue with regard to the needs of vulnerable populations.

Whenever appropriate, in materials and in presentations, the Coalition incorporates language expressing the support of initiatives to reduce tobacco use. Particular effort has been devoted to the need for cost-effective, evidence-based prevention services to be included in health coverage and in the definition of benefits under proposals to extend coverage to those Americans who are currently uninsured and/or to broaden coverage for those who are currently uninsured.

The importance of primary prevention is a point fully integrated into the Coalition’s message strategy. For example, the American Legacy Foundation participated in the activities supported by the Kellogg Foundation grant, including the four Community Forums and Hill Day events. More importantly, the Legacy Foundation is fully engaged in the Coalition’s Steering Committee, policy advocacy, and public education ventures. When the Coalition’s senior leadership met recently with HHS Secretary Sebelius, a message on the importance of primary prevention was among the materials presented.

The Coalition’s support for primary prevention programs in health coverage was also underscored in a memorandum distributed to participants in Coalition Hill Days to set out the themes to be emphasized in congressional meetings. Materials included explained the importance of smoking cessation prevention and wellness programs to critical vulnerable populations.
New Executive Leadership

In addition to membership growth and board leadership changes this year, NCHC experienced a transformative transition and increased its staff size substantially in order to expand and accelerate Coalition efforts for health care reform. The diverse and extraordinary background that each dedicated individual brings to the organization has added new energy and greater cultural competence to the mission-driven team.

Ralph G. Neas, Chief Executive Officer

As the White House and Congressional leaders began to plot a strategy to reform the nation’s health care system Ralph G. Neas, a progressive leader with three decades of bipartisan legislative achievements, was tapped to become Chief Executive Officer (CEO) of the Coalition. The former Executive Director of the Leadership Conference on Civil Rights (LCCR) and the former President and CEO for People for the American Way (PFAW), Mr. Neas came to the Coalition with a rich and long history of leading effective policy advocacy organizations. Neas began his public service career as Chief Counsel to Republican U.S. Senators Edward W. Brooke (1973-1979) and David Durenberger (1979-1980). From 1981-1995, he served as Executive Director of LCCR, the nation's oldest and largest coalition. During that period, Neas directed two dozen successful national campaigns that strengthened every major civil rights law, in a political climate not particularly hospitable to civil rights. Landmark laws enacted, with huge bipartisan majorities and often with the support of the business community, included the Civil Rights Act of 1991, the 1990 Americans with Disabilities Act, the Civil Rights Restoration Act of 1988, the 1988 Fair Housing Act Amendments, and the 1982 Voting Rights Act Extension. Senator Edward Kennedy, in a 1995 Senate floor statement, described Ralph as the "101st Senator for Civil Rights."

During Neas’ tenure at the nonpartisan PFAW and PFAW Foundation (PFAWF), he oversaw a period of significant growth and accomplishments both at the national level and through an effective grassroots advocacy movement. PFAW was a widely recognized legislative force on Capitol Hill, especially with respect to preserving a fair and independent judiciary, public education, and civil rights and civil liberties.

Neas earned his B.A. from the University of Notre Dame and his J.D. from the University of Chicago Law...
School. He has taught courses on the legislative process at the University of Chicago Law School, Georgetown University Law Center, and Harvard University's Kennedy School of Government.

Grace L. Mastalli, Chief Operating Officer

The new CEO assessed the Coalition’s strategic plan and determined that additional staffing and operational enhancements were required in order to successfully execute it, support member activities, strengthen operating procedures, and expand fundraising and development initiatives, while implementing the Kellogg policy advocacy and public education programs during a period of intense external engagement by the CEO and President.

Grace L. Mastalli, a retired Justice Department official with strong legal, policy, compliance, management and communications skills was recruited to join the executive team as Chief Operating Officer to focus on updating the Coalition’s infrastructure and strategic communications plan in addition to applying her policy skills to the reform effort.

Ms. Mastalli had the distinction of serving six Attorneys General and of becoming one of the highest ranking career officials not only of the Justice Department but also of the U.S. Department of Homeland Security. In the Justice Department she held three of the most senior positions available to non-political appointees—Deputy Assistant Attorney General, Associate Deputy Attorney General, and Deputy Associate Attorney General.

During her career, Ms. Mastalli was instrumental in the development of many federal laws, policies, and regulations related to education, civil rights, disability rights, health care fraud, employment, crime and drug control, terrorism, national security, and information management. She served in a number of other key operational and policy positions, including as Associate Director of an education association’s Title IX project, legislative strategist for an education coalition, a trial attorney, legal advisor for a Presidential Advisory Council and as the Senior Counsel for Civil Rights in the White House Office of Management and Budget (OMB).

Ms. Mastalli attended Reed College, the University of Denver and University of Maryland Colleges of Law, and Georgetown University Graduate School of Government. She is an active Member of the Bar of the District of Columbia and serves as an occasional adjunct professor at area universities.

Brenda Girton-Mitchell, Senior Advisor on Faith Initiatives

Rev. Girton-Mitchell served the National Council of the Churches of Christ in the USA as Associate General Secretary for Justice and Advocacy from 2000-2007. She gave leadership to the NCC Washington Office and was responsible for coordinating the social justice and advocacy initiatives on Capitol Hill. She is also the Founder and President of Grace and Race.
Ministries, Inc. - a ministry dedicated to working for racial understanding and reconciliation.

Rev. Girton-Mitchell was licensed and ordained by the Metropolitan Baptist Church where she currently serves as Minister for Stewardship and Missions; under the leadership of Rev. Dr. H. Beecher Hicks, Jr. She was recently appointed as the Ecumenical Officer for the Progressive National Baptist Convention, Inc. and is currently Vice Chair of the Board of Governors for Wesley Theological Seminary. She has completed The Climate Project training under the leadership of Al Gore to become an advocate for climate change education in our churches.

Rev. Girton-Mitchell has received numerous awards, including the 2007 National Council of Negro Women Bethune Recognition Award for Outstanding Woman in Ministry, National Bar Association Presidential Award, the Charlotte Ray Award, and she is the recipient of the Sagamore of the Wabash Award, the highest award given to any civilian by the State of Indiana. In April 2008 she was inducted into the Martin Luther King, Jr. College of Preachers at Morehouse College. She also received the 2008 Society of John Wesley Award of Merit, the highest award granted by Wesley Theological Seminary.

In 2008, Rev. Girton-Mitchell and her husband, James Mitchell, began Girton-Mitchell Associates, LLC, a consulting company assisting churches and nonprofit organizations in the areas of advocacy, leadership development, and conflict resolution.

Reverend Girton-Mitchell received a Bachelor of Science degree in elementary education from Ball State University and a Master degree from Indiana/Purdue University in Indianapolis. She graduated with honors from Chicago Kent College of Law. She received her Master of Divinity degree from Wesley Theological Seminary in Washington, DC.
NCHC’s Staff Members 2009*

Henry E. Simmons, M.D., M.P.H., F.A.C.P., President and Founder
Ralph G. Neas, CEO*
Grace L. Mastalli, COO*
Brenda Girton-Mitchell, Senior Advisor on Faith Initiatives*
Mark A. Goldberg, Executive Vice President
Joel E. Miller, Senior Vice President for Communications and Policy Research
Kendra L. Janevski, Director of Administration*
Misuzu Yamada, Communications Coordinator*
Caryn S. Kaufman, Events Coordinator*
Emmanuel Adepoju, IT Administrative Assistant*
John Kane, Associate for Policy and Strategy*
Mary Ann Nguyen, Associate for Law and Policy*
Julie Bromberg, Associate for Health Education and Public Awareness*
Amelia West, Associate for Administration*
Catherine Doyle, Associate Public Advocacy and Strategy*
Monica Holloway, Associate for Public Health Policy*
Janelle Huelsman, Associate for Media & Communications Strategy*

The Coalition’s staff also is supplemented by a variety of talented consultants, contractors and vendors that help broaden the available base of experience and expertise on a cost-effective basis. For example, accounting services, web-design, IT audits and economic analyses have been out-sourced during the past year.

* Former Executive Director Patricia Q. Schoeni retired in March, 2009.
* New Staff Members in 2009
Membership Development

The Coalition added diversity and more than thirty new members to its ranks this year, while substantially increasing the active involvement of many long-time members. In addition, there are a number of prospective new and returning member groups in active communication with the staff about joining or re-joining the Coalition in the near term. These conversations and a growing appreciation of the Coalition’s uniquely effective policy advocacy role are expected to lead to even greater membership growth. Since the Coalition is committed to the long term, not just to the Congressional action this year, the prospects for continuing growth of membership related to effective implementation and oversight of reform initiatives are strong.

NCHC Membership Pillars

The Coalition has dramatically expanded the reach of its membership with heightened attention to need to strengthen the voices representing the most vulnerable populations. As a result of this renewal and growth, several key pillars of NCHC clearly differentiate it from the many other coalitions now engaged in the health care policy debate. NCHC’s four pillars of membership now include:

1. Medical societies and health care providers
2. Faith-based organizations
3. Consumer groups including those representing vulnerable populations
4. Business and labor organizations

These categories of membership also continue to be focus of our ongoing membership recruitment and development efforts. The Coalition's strategy of working with other coalitions is also an especially productive avenue for both increasing membership and building stronger influence networks. NCHC increasingly is becoming a “coalition of coalitions” and consensus builder among diverse stakeholders.

NCHC Member Organizations 2009

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

It should be noted that many medical providers, specialty and physician groups were among the obstacles faced by the last major health care reform effort in 1993 and 1994. Together, the membership of the Coalition's medical provider organizations — totaling approximately 300,000 — is greater than the membership of the American Medical Association. Specialties, including organizations representing women’s health and wellness, oral health and chiropractic treatment, presently are in contact with the Coalition regarding membership.

### Medical Associations/Societies Members
- American Academy of Family Physicians
- American Academy of Pediatrics
- American Association of Medical Colleges, Council on Teaching Hospitals and Health Systems
- American Cancer Society
- American College of Cardiology
- American College of Emergency Physicians
- American College of Nurse Midwives
- American College of Surgeons
- American Dental Education Association
- American Heart Association
- American Lung Association
- Breast Cancer Network of Strength
- C-Change
- Duke University Medical Center
- Easter Seals
- Johns Hopkins Medicine
- Maternity Center Association
- Michigan Health & Hospital Association
- National Multiple Sclerosis Society
Faith-based Organizations

The support and active participation of Protestant, Jewish, Muslim, Catholic, and other denominations provide the NCHC with a strong network of local religious leaders and congregations who understand the moral urgency of tackling health care reform. Faith-based organization members include:

- The Episcopal Church
- National Council of Churches of Christ in the USA
- Presbyterian Church (USA)
- Religious Action Center of Reform Judaism
- Salvation Army
- United Methodist Church—General Board of Church and Society
- United States Conference of Catholic Bishops

Faith-based coalition members are joined in the belief that access to health care is a basic human right and a requirement of human dignity. To these organizations, cost-containment represents needed stewardship of limited resources and reform of the existing inequitable system is a moral imperative.

NCHC has expanded this outreach initiative by working with a number of faith-based organizations that have not – at least yet – become Coalition members but who are strong allies on health care reform, such as the African American Methodist Episcopal Church, the United Church of Christ, the Islamic Society of North America, Faithful Reform in Healthcare, the Interfaith Alliance, Progressive Baptist Convention, Sojourners, the Christian Methodist Episcopal Church, the Evangelical Lutheran Church, the Jewish Council for Public Affairs, Network, and Christian Churches Together (CCT), among others.
To promote collaboration among faith-based organizations and coalitions, NCHC co-hosted a very effective event which brought together 30 of the country’s top religious leaders for a combined Hill Day and Faith Leader Summit on Health Care. Participants met with officials in the Obama administration and Congress to voice their concerns about health care reform and to express their support of comprehensive, sustainable system reform.

A statement expressing the religious leaders’ unified support of making health care reform an urgent priority was issued at the summit and signed by approximately 50 faith leaders representing Christian, Jewish, Muslim and ecumenical religious organizations. The Summit was sponsored by The Religious Action Center of Reform Judaism and the United Methodist Church – General Board of Church and Society, in collaboration with the National Coalition on Health Care and Families USA. (See excerpts from the statement in the sidebar.)


Today health care reform has become an urgent priority, with many Americans fearful about the health care they now hold and more than 45 million lacking coverage altogether. Rising unemployment, underemployment and a decline in employment benefits have deprived many more of health care. The health of our neighbors and the wholeness of the nation now require that all segments of our society join in finding a solution to this national challenge.

"...Learn to do good, seek justice; rescue the oppressed, defend the orphan, plead for the widow." Isaiah 1:17

"...Love your neighbor as you love yourself." Matthew 22:39

"...Ye who believe! Stand up firmly for Allah, witness to justice...be just, that is next to piety." Qur'an 5:8

Our diverse communities of faith - Jewish, Christian and Muslim- are each shaped and guided by our respective sacred texts which compel us to speak out on behalf of the most vulnerable members of our society. Today that means making comprehensive and compassionate health care reform an urgent priority so that all of our neighbors, especially the people living in poverty, children, and the aged, can be assured of the fullness of life that is central to the holy vision of a beloved and peaceable community...

See Appendix C for full statement
Representatives of Vulnerable Populations

This central pillar of the Coalition’s diverse membership includes organizations dedicated to working with underserved communities and addressing disparities in health status and access to high quality health care that exist among various population groups. Members may focus on one or combinations of factors including age, race and ethnicity, gender, disability, geography, national origin, socioeconomic status, and other demographics. Disparities and inequities have a detrimental impact on the use of health care, quality of care, and thus, on the health and well-being of millions of children and adults in our country. The Coalition’s member organizations work with a diverse group of vulnerable populations, such as children, the disabled, the chronically ill, racial and ethnic minorities, women, the poor and other underserved communities.

This year, the Coalition has focused on developing a unifying non-partisan left-right consensus grounded on a shared vision of health reform legislation that ensures equity and accountability coupled with the belief that individuals affected by health disparities deserve access to comprehensive, culturally and linguistically appropriate health care and wellness services. It is the official position of the Coalition that all Americans and all children in America – including the children of immigrants – should have access to quality health care.

Additionally, the Coalition has strengthened its affiliation with a number of other non-member organizations that work with vulnerable populations and/or religious organizations. For example, the Coalition’s Steering Committee has engaged in ongoing cooperative efforts with minority, civil rights and other advocacy organizations to assure that health and health care inequities receive greater attention in the reform
process. Engagement with organizations on both the left and the right is facilitated by the Coalition’s framework of principles and specifications, and understanding that the Coalition operates and is governed by consensus. As a result, members and partners understand that some divisive issues will not be addressed by the Coalition nor raised by members in a fashion which might derail the progress of comprehensive reform.

---

**Coalition Policy Statement on Immigrant Children**

The Coalition adopted a policy that reform must provide true health care access for all children in America regardless of their parents’ immigration status. NCHC notes that “Coverage for all Americans” must include the children of illegal immigrants who themselves are often American citizens and that the Coalition’s objectives are extended to ensure the provision of culturally and linguistically appropriate services; equal treatment of all workers under employer-based coverage; and elimination of health care disparities and barriers to access.
**Businesses, Business and Labor Organizations**

NCHC members include corporations, as well as business and labor organizations of various sizes, interests and trades who are united in advocating for comprehensive health care reform. Business and labor unions such as Giant Food, Inc., the American Federation of Labor and Congress of Industrial Organizations, Exelon Corporation, the National Education Association, Communication Workers of America, and Duke Energy, recognize that workers and businesses large and small alike will suffer if the increasing costs of health care are not reigned in and reduced.

A new member organization, the Small Business Majority, is providing leadership for Coalition efforts to organize the small business community and offers an increasingly essential component to the Coalition’s public education message. With many businesses facing a crisis because of the high cost of health insurance, the Coalition has relentlessly focused on convincing the public and opinion leaders that skyrocketing health costs not only place the government and corporations at risk – but they place the entire economy and the Nation’s future at risk. Businesses—especially small businesses—cannot be the engines for boosting economic recovery if strangled by prohibitively high health care costs.

The Midwest Business Group on Health, which co-hosted the Chicago forum funded by the Kellogg Foundation, is exploring not only Coalition membership at this time but also a larger collaboration that may bring some members of MBGH
into the Coalition as well. (See description of the Chicago forum follow-up for background information on MBGH).

One former Coalition member, Verizon, has recently rejoined the Coalition and is participating in Coalition activities, including NCHC membership development. Verizon will facilitate interactions with major communications and electronics corporations by initiating discussions with NCHC among prospective members.

Another new business member, Teva Pharmaceuticals, Ltd., is similarly utilizing their connections and membership in other coalitions to advocate Coalition membership to a range of corporations and industry organizations.

The National Coalition on Health Care is working with the organizers of the Bridge Years Health Coalition, some of whom are members of the Coalition, to address the challenges faced by Americans between ages 55 and 64 as they try to retain or obtain adequate, affordable healthcare coverage (see related materials in Appendix D). The Bridge Coalition, led by members of the Coalition including Communications Workers of America (CWA), Verizon Communications, and International Brotherhood of Electrical Workers (IBEW), are promoting a full agenda of activities including:

- Advocacy meetings
- Letters to Congress
- Advertising, and
- In-District Meetings.
Membership Engagement

Substantive Members’ Only Meetings

Between November 2008 and February 2009, Coalition senior staff met individually with 41 representatives of Coalition member groups to discuss proposed activities and to ascertain organizational views on policy issues. These meetings were intended to identify areas of common ground beyond NCHC’s Principles and Specifications among the Coalition’s diverse member groups. Although the specifics of concerns and positions initially surfaced during these meetings have evolved with the ongoing Congressional committees’ work (See e.g., NCHC CEO Testimony in Appendix E). However, cost management, sustainability and reform of financing and delivery issues remain top priorities with members. In addition to informing the Coalition’s internal policy formulation process these “bilateral meetings” helped to identify both the need for greater routine engagement with members and directly resulted in immediate improvement being made to members support and services. (See Appendix F)

Membership engagement has increased both in terms of event participation rates and in the number, nature and scope of activities. Full Committee of the
Whole meetings still are held approximately every six-weeks but now the new Steering Committee of the Coalition, with approximately 20-25 active members, meets weekly on Monday. Steering Committee subcommittees and working groups also meet as necessary. For example, a subcommittee on cost-containment issues developed a white paper to help frame consensus recommendations to the Full Coalition and policy-makers.

The Coalition’s Steering Committee focuses on strategy discussion, information sharing, coordination of nationwide grassroots public education, outreach and advocacy efforts, and development of timely policy recommendations for adoption by the full Coalition. Guest speakers, including White House and Congressional staff and policy experts, frequently provide briefings at both the Full Coalition meetings and weekly Steering Committee meetings. Coalition speakers and presentations at member’s only meetings this year have addressed among other topics:

- Health care reform polling and messaging;
- Incentives for workforce development;
- Options for health care finance and delivery reform;
- Prevention and wellness initiatives,
- Faith Community Priorities
- Health Industry related reform proposals
- Racial, ethnic, immigration status, geographic and other disparities and inequities in health care;
- Small businesses priorities;
- Coverage gaps including:
  - Children
  - Bridge years (55-64)
  - Chronic diseases and disabilities
  - Donut hole issues;
- Pharmaceutical and biologics cost control;
- CBO scoring and system-wide cost containment;
- Policy Proposals including:
  - House Tri-Committee Draft
  - Wyden-Bennett Bill
  - Senator Jay Rockefeller’s MAC Reform Bill
  - Senate HELP Committee Bill Language
  - Senate Finance Committee Options
  - Blue Dog Issues
  - Generic Biologics Legislation
  - Options for System-Wide Cost Containment
  - State, Foreign and Industry Models and Best Practices
  - Comparative Effectiveness Research
  - Bundling and the Disability Community
  - Malpractice Reform
  - Waste, Fraud and Abuse, and
  - Others.
Web-based Members’ Only Collaborative Space

With many new members, scores of meetings to coordinate and massive amounts of information, intelligence and resources to be shared among the Coalition’s members related Foundation support helped the Coalition enter the Web 2.0 era.

By tying Web site and membership development together, the grant support provided the pivot point for moving the Coalition’s communications strategy into the 21st century. As a result of improvements, NCHC is now able to more efficiently manage Web-based content and has expanded capabilities for event registration, tracking inquiries, and notifying members of activities. Additionally, Web upgrades are now in progress and will help to showcase public education and advocacy materials developed with W. K. Kellogg and American Legacy Foundation support or by Coalition members. (See Appendix G for examples)

Importantly, the Web site upgrade will provide greater opportunity for individuals to get involved in health care reform activities and resources for the general public, media representatives, advocates and health care professionals. When re-launched, www.NCHC.org will include new tools for publicizing events and scheduling advocacy opportunities. Member organization event planners will be able to add their own national and field events to the site more easily and to plot the locations on a Google Map to facilitate the local chapters of Coalition groups direct coordination with one another both in Washington and in the field.

Social Networking

This year, the Coalition extended its use not only of the Internet, but of powerful social media tools including Twitter and Facebook. The use of YouTube is also in NCHC’s future.
Twitter

The microblogging service is being used to communicate with current and potential Coalition members and organizations, current and potential supporters, current and potential interns and fellows and members of the media and general public. Twitter is used to communicate up-to-date statistics, promote the Coalition’s media presence and communicate the importance of sustainable reform.

Facebook

The Coalition is using Facebook to build networks of advocates for reform. With access to more than 170 million active users on Facebook, the Coalition now can attract and inform supporters for reform by posting articles, chats, data, blog posts and factual material to counter misinformation campaigns.
Enhanced Web-based Member Services

Following the “Crawl, walk, run, fly” recommended strategy of Edelman, a leading independent global PR firm, NCHC is well on its way to developing an effective “Social Pulpit.”

Initially, the Coalition upgraded its Internet presence to support registration for Kellogg specific activities, and based upon that experience and a number of Steering Committee driven pilot projects using available free trials; vendors were changed and a phased upgrade of the Coalition's Web site began. Most importantly, the Coalition now provides a number of greatly enhanced Web-based services to members.

Particularly useful is that members now have access to a new Members Only Collaborative Space. This simple, secure and powerful online tool helps the Coalition members and their regional, state and local affiliates to more easily connect, share and collaborate. The Coalition’s new flexible set of online community tools in the “Member’s Only Collaborative Space” helps magnify impact with shared access to up-to-the-minute alerts, important policy documents and other resources such as templates, fact sheets, customizable sample documents.

The on-line power of the space to coordinate projects and activities, share knowledge and information with each other, local chapters and field staff with minimal effort, and access critical documents remotely at any time of the day or night is changing how the Coalition supports its members. Content management is shared with our member organizations so new materials may be posted directly by members for either the use of the entire Coalition or, when appropriate only for access by that organization’s own personnel or membership.

The ability to control on-line access to Community Forum materials, for example, was essential to being able to share some speakers’ presentations with all Coalition members because a small but significant number of presenters refused to authorize posting their Forum materials on the open Web as originally intended.

The Coalition’s Web site’s content and functionality are being enhanced regularly—often daily—and a general upgrade is in process to enable to Coalition and its members to make better use of social media outlets such as You-Tube, Facebook, Twitter, RSS feeds and so forth. At the same time, the upgrade will greatly simplify routine operations, creating a more user-friendly interface for staff—reducing the risk of single point of failure with previous vendors and eliminate the requirement that in-house staff be familiar with HTML programming.
NCHC Public Education and Advocacy Activities

Collaborating With Other Coalitions

Coordinating public education and advocacy efforts with other groups and coalitions is critical to advance health care reform. NCHC is working hard to eliminate redundancy and coordinate its public education and advocacy campaign activities with the activities of other coalitions and member organizations. Specifically, staff has reached out to and will continue to work with a wide range of other coalitions in order to coordinate messaging targets, to counteract opposition and to ensure that the call for reform is heard where most needed. Every effort is made to ensure that major media event calendars are coordinated and that NCHC members of related special interest coalitions are supported to the extent possible.

It has been estimated that every dollar of support to NCHC leverages at least ten dollars in value through the investment of member organizations in advocacy both in Washington, D.C. and communities across the country. NCHC led public education and outreach activities including, but not limited to the Kellogg Foundation supported Hill Day events and Community Forums, have involved the dedicated participation of NCHC staff, leadership and representatives of some 80 member organizations. Such cooperation is invaluable to achieve reform objectives as NCHC members work together to expand public support, to recruit new institutional participants, and to educate the media and opinion leaders in key states and locales. NCHC’s commitment to bipartisan dialogue gives the Coalition a unique ability to forge consensus across partisan and constituency lines.

Community Forums

The Kellogg Foundation’s grant for a program of work to improve the prospects of enacting comprehensive health care reform supported a series of events eventually held during a time of national economic turmoil and political polarization. The deteriorating economy and increasingly dynamic health care policy environment greatly intensified interest in and the importance of the Coalition’s work this year. The interactive proceedings of each Community Forum and Hill Day activity underscored emerging areas of common ground and provided evidence of the destructive power of mis-information campaigns using scare tactics. [See Appendix H for agenda, speaker bios, and registration list for the following Community Forums. Reports are available online at www.nchc.org.]
California Forum

The National Coalition on Health Care and the California Public Employees’ Retirement System (CalPERS) co-sponsored a major forum on “National Health Care Reform and Its Potential Impacts in California,” in Sacramento. The forum was attended by approximately 140 attendees brought together nationally known experts and local leaders—including doctors, policy analysts, distinguished academics, consumer and patient advocates and business, health care and insurance leaders—to discuss California’s historic attempt to enact health reform legislation and the lessons of that experience for enacting federal health care reform.

Panelists agreed that cost, quality and access are the three primary areas requiring reform. Requiring the financing of reform to be addressed early in negotiations and allowing for major stakeholders—including the business community and health care industry—to participate in drafting a health care reform bill was highlighted as key components to maintaining a healthy debate about options and solutions for reform. A variety of options were discussed, such as promotion of wellness and prevention services and improving quality through comparative effectiveness efforts. Another option was to ensure a streamlined health insurance process to promote accessibility and affordability by implementing a new insurance pooling mechanism. The forum provided a rich and engaging experience for attendees who were able to maintain an open dialogue with the expert panelists on the impact of health care reform on California. Overall, the discussions led to informative and unique ideas towards improving the nation and California’s health care system.

New York City Forum

The National Coalition on Health Care worked with the New York Academy of Medicine in hosting a forum in New York called “National Health Care Reform and Its Potential Impacts in New York City.” Representative Charles Rangel (D-NY), chair of the House Ways and Means Committee, was a guest speaker at the forum and provided an update on the political activities occurring on the Hill. He spoke to an overflow crowd of more than 150 registrants and uncounted members of the public, emphasizing the perilous road ahead if health care reform is not enacted to control escalating health care costs.
National policy experts and New York community leaders agreed that the escalating cost of health care and insurance affect job creation, wage growth and the viability of pension programs. In addition, health care costs erode the living standards of Americans and impede businesses’ efforts to compete in the global economy against companies from nations with universal coverage. Proposed solutions discussed included options for reducing waste, preventing the occurrence of unnecessary care and improving the quality of care. Adoption of these proposals would reduce national spending without compromising medical outcomes. The speakers’ framed the issues and presented feasible options for reform. The theme emerging from of the forum was one of the urgency to develop bipartisan support for a uniquely American and sustainable health care system.

Illinois Forum

The National Coalition on Health Care co-hosted a forum in Chicago with the Midwest Business Group on Health called “National Health Care Reform and Its Potential Impacts in Illinois.” With approximately 120 participants in attendance, national experts and local leaders—including major Fortune 500 company representatives, physicians, consumer and patient advocates and other community leaders—discussed the strengths and weaknesses of major Congressional health care reform bills and the likely ramifications of each on the Illinois business community and consumers. Corporate leaders urged the business community to lead the way in elevating the performance of America’s health care system and to make a “business case” for employer leadership in developing solutions to the uninsured problem and slowing health care costs. The opportunity for employers to keep their autonomy and creatively align their goals with the government to improve health care delivery and financing reform was a central conclusion of the event.

Florida Forum

The National Coalition on Health Care and the Collins Center for Public Policy co-sponsored a forum in Miami on “National Health Care Reform and Its Potential Impacts in Florida,” at Miami-Dade College. Over 110 participants at this forum engaged with nationally known experts, local officials, company representatives,
doctors, policy analysts, academics, consumer and patient advocates, and health care and insurance leaders. While attendees discussed the strengths and weaknesses of major Congressional health care reform proposals and their likely ramifications for the Florida business community, payers and consumers, opponents of reform with placards opposing socialized medicine and federal euthanasia.

The key theme emerging from this forum was the essential need for reform to improve the equitability of delivery and financing of medical care across all populations. Specifically addressed was how reform could improve health outcomes for the poor and near-poor. The priority purpose of major health care reforms for attendees in Miami was to reduce the health consequences of being poor by ensuring better and timely access to quality care and linguistically and culturally appropriate services, for all.

Each time a man stands up for an ideal, or acts to improve the lot of others, or strikes out against injustice, he sends forth a tiny ripple of hope... and crossing each other from a million different centers of energy and daring those ripples build a current that can sweep down the mightiest walls of oppression and resistance.

~Robert F. Kennedy
Community Forum Accomplishments and Follow-up Activities

Summaries of the four Community Forums as completed have been made available to participants and advocates working in the host communities. Excerpts and findings are being provided to thought leaders and policymakers at the Congressional and state level. Featured Forum speakers also are disseminating Forum materials through their respective academic, advocacy and employment networks and to their media contacts. By engaging key Forum speakers and participants in the follow-on public education and advocacy materials distribution and promotion effort, the value return on the Coalition’s investment in related communications is greatly amplified.

A Final Reflective and Synoptic Report also is being drafted based on the Community Forums in order to more clearly identify crucial areas of common-ground, areas of difference and highlighting lessons learned for national policy-makers and opinion leaders.

The availability of Forum materials, organizing tools and reports is being communicated using the Coalition’s newly developed presence on Facebook and Twitter. All informational materials are made available through the Coalition’s Web site and some will be prominently featured in the planned Autumn 2009 re-launch of the www.nchc.org Web site with upgraded functionality.

The feasibility of either a press event or symposium involving selected participants from the California, New York, Illinois, and Florida policymakers is under consideration for September 2009 in Washington, DC with pod-casting to the four forum host communities.

A series of related template blogs, talking points, and opinion pieces have been and will continue to be developed for use by Coalition members, their constituencies and other stakeholders. Particular attention is being paid to reaching targeted markets using both old and new media. For example, an effort is being made to engage with talk-radio hosts in key media markets. These initiatives will strengthen the new alliances born from Forums and Hill Day events and support Coalition partners and member groups in the communities where forums and spin-off events have been held. These allied interests plan to work with the Coalition and other stakeholders on enacting and implementing health care reform.

Especially strong impetus for active ongoing collaborative—even divide bridging—activities have emerged from the final two Community Forums in Illinois and Florida.
Illinois

Not only is the Midwest Business Group on Health (MBGH) engaged in membership discussions with the Coalition but some of MBGH’s members may also join NCHC as the common ground and mutual reinforcing partnership is strengthened.

Following the Illinois Forum, the MBGH began conducting a number of follow-on activities in consultation with NCHC, including surveys of their corporate members regarding health care reform concerns and priorities (See sidebar for a list of MBGH members). Together the Coalition and MBGH will be exploring policy options with employers of all sizes that accommodate businesses desire for autonomy and affordable coverage in a fashion that better aligns these corporate leaders’ interests with the goals of federal state and local governments regarding improvements in health care delivery and financing. NCHC will work with MBGH in the near term to clarify corporate member priorities and to heighten the active, positive civic involvement of businesses of all sizes in the achieving health system reforms.

Also in partnership with MBGH and the labor unions represented at the July 24 Illinois Forum, the Coalition is considering a wide range of possible next steps including but not limited to:

-- A joint project and report designed to expand the availability of
collaborative purchasing groups, with the intent of expanding the reach of these successful cost-management organizations to smaller employers. As part of this effort, large firms would work with small businesses to address purchasing problems.

-- A policy initiative to explore with employers, unions and policymakers the value of making Medicaid available by statute to micro employers who would be challenged under any current reform scenario to provide affordable coverage.

-- Development of pilot efforts using economic incentives designed to encourage adults, especially parents, to appreciate the value of wellness and prevention and to make better informed decisions about the use of health care.

Florida

The Collins Center for Public Policy is partnering with the Coalition to explore how health care reform efforts might be supplemented by other approaches including voluntary initiatives to better address the many health related social consequences of being poor and near-poor; and to other factors associated with poorer medical outcomes.

Plans include working with Collins and Miami-Dade College regarding how the Federal Office of Minority Health and related state agencies can foster more collaborative efforts with all key stakeholder groups to better address the widening disparities and inequities in the health care system due not only to access and coverage gaps but also to linguistic and cultural barriers.

Additionally, Florida forum participants also will become of an ongoing networking and survey effort by the Coalition to supplement the on-site forum program evaluation and continue to extend their individual and organizational engagement in activities to reform America’s health care delivery system.

Thank you for including Mid-west Business Group on Heath (MBGH) in what was one of our most well received educational events of 2009. Our collaboration produced a program with high quality content and high caliber speakers. Feedback from our members has been outstanding.

- Cheryl Larson, Vice President
An example of extended collaboration resulting from the Community Forums:

Immediately following the “National Health Care Reform and Its Potential Impacts in Illinois” NCHC was invited to be the guest of the Midwest Business Group on Health’s workshop entitled “Pharmacy Benefits Academy.” The two-day event was co-sponsored by the MBGH and Pharmacy Outcomes Specialists and provided insight into current efforts of businesses to contain rising health care coverage costs without sacrificing quality of care. Business leaders discussed strategies for creating transparency of fees associated with the services provided by pharmacy benefits, how to obtain pharmacy manufacturer rebates and methods of effective consumer health education to help address the overutilization of medical services and medicine. The event was timely in that the House Energy and Commerce Committee had just approved an amendment requiring the use of a drug formulary in any public plan option and another provision that would if enacted require pharmacy benefit managers to be subjected to additional transparency requirements to control costs.

The event focused on providing companies with tools to more effectively work design health benefit packages, process claims, and provide data and actuarial support. Cost containment was the primary focus of the meeting with businesses citing some success in reducing the cost increases by implementing cost containment measures. Guest speakers from large companies such as Delta Air Lines and Pitney Bowes provided successful examples of implementing cost-saving measures through disease management and wellness programs tailored toward the sickest population. They also reported real value in ensuring that the healthy and less healthy group had preventive care services, which reduces the likelihood that they will fall into the lower percentage of the sickest population with the costliest health care needs.

The themes of addressing overutilization of drugs and creating awareness for pharmaceutical practices that drive up health care costs for businesses was highlighted in the keynote speech. As the author of Overdosed America, John Abramson touched upon the common practice of pharmaceutical companies providing continuing education to physicians as a powerful tool to advertise their products. This creates a conflict of interest as physicians receive information that is not necessarily aligned with the goals of comparative effectiveness research. John Golenski, a former Jesuit and President and Founder of Health Priorities Group, Inc., spoke about the need to incorporate ethical decision making when planning a pharmacy benefit design. He urged business leaders to adopt the principle of compassion in principles for making formulary decisions. Furthermore, he stressed that every utilization method is an ethical choice between the physician and the patient.

The results of the workshop will be shared with Coalition members and will help to inform related policy deliberations.
Speeches
In addition to participation as speakers, moderators and presenters in Coalition sponsored events and meetings, Coalition senior staff speaking engagements have included numerous medical society events as well as appearances at:

- University of Notre Dame
- Academy of Health Annual Research Meeting
- Asian & Pacific Islander American Health Forum
- Central Michigan University
- Annual Legislative Conference of National Conference on Public Employee Retirement Systems
- Council for Christian Colleges and Universities
- “Consultation on Conscience” hosted by the Religious Action Center of the Union of Reform Judaism
- Consortium for Citizens with Disabilities
- Congressional Small Business Caucus
- Faith Leaders Summit
- International Brotherhood of Teamsters
- National Association of State Head Injury Administrators
- Brain Injury Association
- Democratic Club, Long Boat Key, Florida
- National Association of Corporate Directors
- Council of Institutional Investors
- National Multiple Sclerosis Society
- St. Thomas University Washington DC Conference
- Organization of Chinese Americans 2009 National Convention
- Washington College of Law, American University
- The Washington Network Group
- The Caux Roundtable
- National Coordinating Committee of Multi-Employer Plans
- International Foundation of Employee Benefit Plans

Follow-on activities resulting from such appearances often include media interviews, requests for membership information, and opinion leader engagement in reform efforts. For example, Notre Dame Provost Thomas Burish will author and publish an article with Coalition assistance on health care reform as a moral issue. (See Appendix I for a copy of the speech given at Notre Dame)
Congressional and Executive Branch Activities

The Coalition:

- Discussed health care reform issues with senior officials of both the McCain and Obama Presidential campaigns.

- Participated in the White House Summit on Health Care Reform on March 5. About 150 national leaders met with President Obama and key White House staff to discuss policy issues. NCHC senior staff are routinely in contact key Executive Branch and Congressional leaders involved in health policy matters.

- Held more than four major Hill Advocacy Days including one on February 27, 2009 when 45 Coalition members composed of teams of 4-5 representatives, met with over 70 congressional staff responsible for health care policy issues. The teams conveyed the urgency of health care reform and the key components that should be part of comprehensive reform bill. Subsequent smaller Coalition Hill Advocacy Days targeted particularly critical members, including Blue Dogs and key committee members, physicians, and small business caucuses.

- Co-sponsored an exceptionally successful Hill Day, the “Faith Leader Summit on Health Care” with Families USA. More than 40 religious organizations gathered together in the U.S. Capitol on July 7, 2009 to meet with White House officials and members of Congress, including House Speaker Nancy Pelosi, D-Calif., U.S. Secretary of Health and Human Services Kathleen Sebelius, U.S. Senator Debbie Stabenow, D-Mich., US. Senator Dick Durbin, D-Ill., and U.S. Rep. John Dingell, D-Mich. The event was a collective effort to build support among the different religious organizations, including Christian, Jewish, Muslim, and Hindu communities, for a comprehensive health care reform. (See Appendix C for the full Summit Statement and Signatories)

- Regularly met and consulted with key health policy staff both on the Hill and within the White House and the Department of Health and Human Services obtaining critically important intelligence on the status of complicated policy issues and behind-the-scenes discussions. Routinely communicated via email policy statements and concerns to all key Republican and Democratic Congressional staffers working on health care reform related matters.

- Increased netroots and grassroots capabilities. Used the weekly Steering Committee meetings to sharpen the focus of messaging as well as target and coordinate member resources for effective grassroots advocacy.

- Met in the Capitol Visitor’s Center where a full Coalition meeting was addressed by Liz Fowler from Chairman Baucus’s Finance Committee staff and Jack Ebeler from Chairman Waxman’s House Committee on Energy and Commerce staff. (Following that
meeting, attendees used their presence on the Hill to meet with many key Members of Congress and relevant staff.)

- Was invited by the Chairman of the Committee on Energy and Commerce to be the lead-off witness to testify regarding the Tri-Committee Proposal on June 23rd, 2009. The Coalition’s statement was distributed widely to the media, on the Hill and to institutional friends and individuals interested in health care reform. (See Appendix E for Full Testimony)

- Met with Secretary Sebelius on June 30th, 2009 regarding reform efforts and how the Coalition might assist the Administration in achieving legislative reform.

- Sent a letter to the Senate HELP committee Chairman Senator Ted Kennedy and the Committee’s ranking member, Senator Michael Enzi (R-WY) encouraging support for the Hatch-Waxman model of exclusivity for biologic drugs. (See Appendix J)

- Signed-on to a statement of consumer groups regarding the adoption of the Eshoo-Barton Amendment by the House Committee on Energy and Commerce. (See Appendix K)

- Encouraged NCHC Members to support the Bridge Coalition’s work to assure Americans between ages 55 and 64 can retain or obtain adequate, affordable healthcare coverage. (See Appendix L)

- Engaged in a wide range of other policy advocacy and public education activities throughout the year.

Extensive Media Press Coverage

The Coalition has emerged as a key voice in the increasingly heated debate on health care reform. Media-initiated requests for information on Coalition policy and data regarding the uninsured, health care costs and quality of care issues have been a constant throughout the Coalition’s history. This year’s confluence of events – economically, politically, and literally – has geometrically increased the demand for interviews and appearances by Coalition representative from national and local media outlets. (See Appendix M for examples of published NCHC Articles)
Over the past three months alone, NCHC officers have participated in a number of live television and radio interviews about health care reform including Atlantic Television, ABC’s Topline with Rick Klein and MSNBC’s shows. Opinion pieces authored by the Coalition’s President and CEO appeared in the Washington Post, Roll Call and the Des Moines Register on multiple occasions. A series of meetings with editorial boards, including the Editorial Board of the Washington Post and Roll Call resulted in frequent requests for comment, or in the case of the National Journal, blog entries.

The Coalition’s reports and spokespeople have been quoted by over 200 major media outlets since February 2009. National media mentions and appearances include but have not been limited to:

- ABC News
- CBS News
- National Public Radio*
- New York Times*
- Washington Post*
- MSNBC*
- Associated Press*
- Fox Business News
- Los Angeles Times*
- Newsweek*
- Wall Street Journal
- Washington Times
- Newsweek on Air*
- Air America

* Denotes multiple appearances.
- National Journal*
- Roll Call*
- The Hill*
- Politico*
- Legal Times*
- Congressional Quarterly
- Chicago Tribune
- Chicago Sun Times
- Congressional Digest
- C-SPAN
- Kaiser Health News
- Christian Science Monitor
- AARP Bulletin
- Atlantic Television Network
- XM Satellite Radio
- and many online and local publications such as the Des Moines Register*, The Record (Bergen City, NJ) and Sacramento Bee

The Coalition routinely issues press releases and statements to approximately 4,000 media contacts and thought leaders regarding policy developments and actions ranging from the appointment and confirmation of the Secretary Sebelius to the Department of Health and Human Services and the President’s address on health care reform to industry and Congressional actions, cost containment concerns, obstacles to reform, and new data related to reform. (See Appendix N for a full list since January 2009) Additionally, demonstrating the Coalition’s ability to bridge political and policy divides, the inaugural issue of the ultra-conservative Regent University Journal of Law and Public Policy features an article titled “Comprehensive Health Care Reform: An Urgent Need Meets An Opportunity,” co-authored by the Coalition’s President and CEO. (See Appendix O)

The Coalition’s dramatically enhanced media profile and increased interest in reform also are evidenced by greater traffic to the NCHC website and a growing number of media references and academic citations to Coalition fact sheets and reports. In this past year, over 3,000 citations have been documented and with the recent posting of updated data and fact sheets on topics such as disparities, prevention and immigrant children, an even more dramatic upswing can be anticipated. As a result of the growing popularity of health system data, the NCHC website now is prominently positioned by search engines such as Google.
New Initiatives

The Way Ahead: As the policy debate about health care has become more partisan, the Coalition has renewed its attention to fundamental values and the importance of bridging the divide between diverse interest groups.

The events of this watershed year have motivated the Coalition to build new partnerships at the local, regional, state and national levels in order to more effectively address the inextricably linked and difficult challenges of health care, prosperity and social justice that lie ahead.

Among the new initiatives of the Coalition is not only intensive consensus building and policy advocacy but also an effort to help empower the next generation of leaders committed to the importance of universal access to health and wellness care to the nation’s future.

The Paul G Rogers Memorial Intern and Fellows Program

The Honorable Paul G. Rogers (1921-2008), longtime Co-Chair of the National Coalition on Health Care (1990-2008) and former U.S. Congressman from Florida (1955-79), served as chair of the House Subcommittee on Health and the Environment from 1971-79 before joining the law firm of Hogan & Hartson.

In Congressman Rogers’s memory, NCHC launched an intern and fellows program to work side-by-side with professional staff on projects designed to advance the Coalition’s mission. Activities vary based upon the interests, background and experience of the individual but include legal, legislative, or economic re-search and analysis; communications; public education and policy advocacy campaigns; data collection; provision of training and technical assistance; or membership services.

Given the rigorously non-partisan nature of the Coalition, as well as its earned and deserved reputation as an objective source of information and analysis, participants have a unique opportunity to work with nationally known leaders engaged in the current health care reform debate and subsequent policy implementation process. The program designed to provide exceptionally qualified and highly motivated graduate and law students with in-depth experience working on key aspects of U.S. health care policy research, analysis and advocacy.

A national competition for this program is now underway with the first successful candidates expected to join the Coalition’s Washington DC staff in August 2009.

“The future is not some place we are going to, but one we are creating. The paths are not to be found, but made, and the activity of making them changes both the maker and the destination.”

--John Schaar
(educator and activist)
Identifying and Building upon Common Ground

Opponents of reform are strong, well-funded and adept at framing issues in highly divisive terms.

Those who support reform must eschew credit and join forces to frame strategies of consensus. The Coalition is engaged in an urgent struggle to identify and build upon common ground, to help create the political will among law makers and voters alike, to enact fundamental system wide and systemic health care reforms. Enacting policies to truly reduce costs – not only those of the federal government but the costs of all payers – while providing nearly universal coverage involves more than merely the rhetoric of “shared responsibility and shared sacrifice.”

NCHC is committed to building a national bipartisan consensus in support of sustainable, equitable reform now before the current “once in a political lifetime” opportunity is imperiled by disruption, distortion and fear mongering. There are broad areas of agreement and middle ground to be cultivated if the country’s leaders can be persuaded to move beyond special interest influence, scape-goating and industry vilification to agree that America’s health care system is dysfunctional. It costs too much to serve too few.

After nearly a year of re-invention, the Coalition has evolved in order to become more responsive to its members, more innovative in marshalling the tools that shape policy, more cost-effective and focused, more attentive to advocacy on behalf of those less visible and less well-represented in the centers of power, and more dedicated than ever before to bridging the divides among Americans.

The Coalition’s strategy going forward is simple but vital. The Coalition is building active alliances across party lines, engaging business and nonprofit leaders, public officials and community activists. The work initiated by the Community Forums helped to identify ways for policy reform to address each community’s needs with a pragmatic and principled eye on the ultimate goal of advancing the common good. NCHC continues to seek and create opportunities to partner with others in order to amplify our collective efforts. It is clear that this year’s reform effort must succeed. Too much is at stake: the health and well-being of millions of American families, and the future of the Nation’s economic and fiscal health.

Once legislative reform is enacted – when it is enacted – the Coalition will turn its attention and energy to the all important implementation process.
Fundraising and Development

The Coalition has submitted proposals to over fifty potential funding sources this year. NCHC always has been the beneficiary of generous support from member organizations but many are suffering from the economic downturn and have been forced to reduce dues and staff.

The Coalition’s primary fundraising efforts this year have been directed at filling the gaps in the array of activities sponsored by other advocates for reform. Specifically, funding has been sought for public education, policy analysis, advocacy and coalition building related to winning bipartisan support for reform from moderate and centrist voters and lawmakers concerned with disparities, cost containment and sustainability issues. Given the Coalition’s leadership, membership and capacity to work with major stakeholders to achieve broad consensus NCHC is positioned to directly and positively impact the policy outcomes of the legislative process during the next four months and the implementation of reform thereafter.

The Coalition also has requested support for underserved communities’ empowerment programs designed to make opinion leaders, the public, press, providers and policymakers more receptive both to enactment and effective implementation of reforms that serve the interests of children and other vulnerable populations.

As the increasingly polarized legislative process and public debate have unfolded, public support for the reforms necessary to achieve affordable universal coverage, improved quality and stabilized health care costs has been weakening.

Thus, with increasing urgency, NCHC has requested support to intensify and expand efforts in the health care reform arena, all drawing upon the resources, expertise and capacity of the Coalition’s member organizations and affiliates.

Program Priorities

At this critical juncture, funds are sought to focus on building consensus regarding:

- How best to contain costs, wringing excess, duplication, waste and inefficiencies from the system.
- How best to deliver sustainable prevention and early intervention best practices to vulnerable and hard to reach populations including low income, minority, immigrant (both legal and undocumented), children and the elderly poor.
- How best to ensure quality care and best practices for those who become ill while minimizing waste that may arise from inefficient public and private bureaucracies, duplicative or unnecessary treatments, and fear of legal liabilities and high cost of malpractice insurance that can undermine best practices, and discourage professional presence in underserved or high risk communities.

_The first wealth is health._

-Ralph Waldo Emerson
• How best to craft and implement reforms that not only achieve required public and political support, but also are designed to maximize effective and efficient implementation in communities throughout the country with special attention to engaging the institutions best able to secure the trust and participation of hard to serve populations.

Public Education, Advocacy and Communications

The public education and advocacy program proposal is for an intensive initiative designed to use grass-tops and grassroots advocates, the business and faith communities, and the engaged public to drive support among opinion leaders and policy-makers. By leveraging the Coalition’s members’ substantial reach to many state affiliates and local chapters, as well congregations, the Coalition proposes to target and fill critical gaps and to connect with opinion leaders and policy shapers unreceptive to other messengers. At the same time, the Coalition can amplify, integrate and supplement the capacities of those already trying to make the case for health care reform in other key areas.

The doctor of the future will give no medicine but will interest his patients in the care of the human frame, in diet and in the cause and prevention of disease.

-Thomas Edison

By employing both on the ground and online campaigns to provide direct messaging, technical assistance and strengthen existing local leadership in key states, the Coalition proposes to assist and energize a wide range of stakeholder advocacy networks and other coalitions seeking to influence the terms of the policy debate. Only through targeted amplification of voices supporting health system reform that includes cost-effective prevention and equitable financing -- will the needs of the most vulnerable populations be addressed. Especially important is equipping leaders among the faith, business and health care provider communities to make the case to opinion leaders in target regions where other advocates’ efforts have been ineffective or counter-productive.

Both top-down and bottom-up communications strategies already in use would be expanded and enhanced to reach target audiences, to answer questions, to clarify reform alternatives and to accentuate consensus building factors such as fairness, quality, stability, cost containment and the long-term economic impacts of the status quo are part of the Coalition’s strategy, which includes:

• Building linkages among networks and coalitions of policy experts, associations of practitioners, consumers and faith groups

• Dissemination of information intended to promote better reasoned reactions and American value-oriented opinions among voters and those who shape policy

• Rapid response through multiple channels as needed to combat misinformation from partisan and special interest sources or assess new developments
• Initiatives to highlight and help meet the needs of America’s most vulnerable populations which often include children, the disabled, people of color, immigrants, the elderly and the at risk 55-64 age cohort

NCHC has been seeking funding for a high-impact campaign aimed at key states to boost civic engagement and public understanding of the necessity of enacting health system reform. The goal is to reach audiences and jurisdictions essential to the development of a bipartisan consensus but likely to be missed by, or unresponsive to, the messages of other advocates.

The planned four month long campaign to begin in August 2009 includes the following core activities:

Ideas to tackle the most intractable issues to achieve smart, sustainable reform solutions. Drawing upon the extraordinary expertise of our members and policy staff, NCHC will evaluate and generate ideas to help drive the process smartly forward. Our commentaries, meetings, and credibility provide a trusted clearinghouse of policy and political intelligence. Particular priority will be given to ideas that can achieve consensus on issues related to full access to health services, including all children regardless of immigration status, legal immigrants regardless of when they arrived, and eliminating disparities all racial, ethnic and other underserved communities, both urban and rural. NCHC will also draw upon and promote widely throughout its membership and policy makers the ideas of California Endowment grantees related to culturally competent health systems, community based health initiatives, and prevention, the elimination of health disparities and promoting greater workforce diversity among health workers and professionals.

Building upon the July 7, 2009 Faith-Based Summit on Health Care Reform. Utilizing both the letter in support of comprehensive reform signed by 50 national religious leaders and their respective pulpits to make the case that affordable and accessible health care now is an ethical and moral issue. (Avenging Angels, a NY-based advertising firm, is providing pro bono design assistance for a related advertising campaign.) Technical assistance also will support the national staff working on health care reform in the Protestant, Catholic, Islamic, Jewish and Inter-denominational organizations.

In nothing do men more nearly approach the gods than in giving health to men.

- Cicero

Strategic Assistance and Empowerment of Faith, Minority and Immigrant Institutions in California, at the state and local level through existing networks and through NCHC’s Web-based Communications, listservs and local affiliates of member organizations. NCHC will develop and disseminate—using both traditional social media—templates of action alerts, talking points, toolkits and performance measures for local customization.
through our national organizational network members with an emphasis on faith, low income, migrant and minority communities, rural and urban. We will also work closely with mainstream organizations to encourage understanding and support of policy outcomes that incorporate the priority needs of minority and immigrant communities, including access to culturally and linguistically appropriate prevention services, and the right to receive affordable, high quality care.

Other longer term proposals request support for Coalition initiatives specifically related to coordination of health care reform implementation initiatives.
A Closer Look at NCHC in 2009

New Board Member Bios

Bob Edgar, Co-Chair Of NCHC

In May 2007, Bob Edgar was named President and CEO of Common Cause, a national nonpartisan, non-profit "citizens" lobby working to make government at all levels more honest, open and accountable, and to connect citizens with their democracy.

Bob arrived at Common Cause with a long history of leadership and public service that included 12 years in Congress. He was the general secretary of the National Council of the Churches of Christ in the USA for seven years immediately before arriving at Common Cause.

Elected to the U.S. House of Representatives in 1974 to represent the Seventh Congressional District of Pennsylvania, outside of Philadelphia, Bob was part of the congressional class nicknamed "the Watergate babies," those elected in the wake of the Watergate scandal and who led sweeping reforms of Congress.

During six terms in the US House, Bob led efforts to improve public transportation, fought wasteful water projects and authored the community Right to Know provision of Super Fund legislation. He also served on the House Select Committee on Assassinations that investigated the deaths of Dr. Martin Luther King Jr., and President John F. Kennedy.

Bob ran unsuccessfully for the US Senate in 1986 against now Sen. Arlen Specter. That race fueled his frustration with the undue influence of money in politics and he became an active supporter of clean elections and campaign finance reform, issues that have long been Common Cause's hallmark. He served on Common Cause's National Governing Board for several years before becoming President of the organization.

Under Bob's leadership, Common Cause is championing a number of critical issues and reforms, including the public funding of political campaigns at all levels, election reforms that make voting more accurate, secure and accessible, improved ethics at all levels of government and a diverse and open media.

An active volunteer, Bob sits on the boards of several other organizations, including Independent Sector, which was also founded by Common Cause's founder, John Gardner, Families USA and the National Religious Partnership for the Environment.

Bob received a Bachelor of Arts degree from Lycoming College, Williamsport, Pa., and a master of divinity degree from the Theological School of Drew University, Madison, N.J. He has also been President of the Claremont School of Theology. He holds five honorary doctoral degrees.
Bob is the author of "Middle Church," a call to progressive people of faith to take back the moral high ground from the right-wing extremists and make America a better and less divided country.

Cheryl G. Healton, Dr. P.H.

Following the creation of the American Legacy Foundation in 1999, Dr. Cheryl Healton joined the staff as the first President and chief executive officer of this groundbreaking public health nonprofit, created by the historic Master Settlement Agreement between 46 state attorneys general, five U.S. territories and the tobacco industry. Dr. Healton was selected for this important post following a nationwide search and has worked tirelessly to further the foundation's ambitious mission: to build a world where young people reject tobacco and anyone can quit. During her tenure with the foundation, she has guided the highly acclaimed, national youth tobacco prevention counter-marketing campaign, “truth” that has been credited in part with reducing youth smoking prevalence to its current 28-year low.

Although her current focus is aimed at reducing the deadly toll of tobacco on Americans, Dr. Healton's long and dynamic career in the field of public health has earned her national recognition and praise. The recipient of numerous prestigious awards, she has recently been honored with the American Lung Association’s Life and Breath Award in 2003; with the 2003 Social Justice Award from the State of Hawaii; and has been named "Star" honoree for the 2004 New York Women's Agenda (NYWA) Star Breakfast - a gala where the NYWA honors outstanding women who represent the spirit of New York, who provide leadership in business and in the community, and who are role models for other women.

Dr. Healton holds a doctorate from Columbia University's School of Public Health and a master's degree in Public Administration at New York University for health policy and planning. She joined the American Legacy Foundation from Columbia University's Joseph L. Mailman School of Public Health in New York, where she served as Head of the Division of Socio-medical Sciences and Associate Dean for Program Development.

A thought-provoking public speaker, Dr. Healton has given a multitude of presentations around the world. Considered bold, inspirational and humorous, she is a frequent commentator in national and local broadcast and print news coverage regarding tobacco control issues, which include guest appearances on ABC's Good Morning America; CNN's Larry King Live; NBC's Today, MSNBC's Hardball with Chris Matthews, National Public Radio and more.

John Rother

John Rother is the Director of Legislation and Public Policy for the American Association of Retired Persons (AARP). He is responsible for the federal and state legislative advocacy activities of the Association, and for the policy research and public education programs that support that effort. He is an authority on health care, long-term care, Social Security, pensions and employment policies.
Prior to joining AARP, Mr. Rother served eight years in the U.S. Senate as Special Counsel for Labor and Health to former Senator Jacob Javits (R-NY), and as Staff Director and Chief Counsel for the Special Committee on Aging under its Chairman, Senator John Heinz (R-PA). He serves on several Boards and Commissions, including the Corporation for National Service, the National Committee for Quality Assurance, the Foundation for Accountability in Health Care, the Institute of Medicine's National Roundtable on Health Care Quality, the National Academy on Aging, Generations United and the National Academy of Social Insurance's study panel on Medicare.

He has served as a member of the ERISA Advisory Council for the Secretary of Labor; as a member of the Secretary's Blue-Ribbon Advisory Commission on the FDA (Edwards Commission); and as a member of the Commonwealth Fund's Commission on Elderly People Living Alone. In 1996, Mr. Rother was on special assignment to study the future implications of the transition to managed care in the health care system, and the retirement challenges facing the boomer generation.

John Rother is an Honors Graduate of Oberlin College and the University of Pennsylvania Law School, where he was Editor of the Law Review.

John I. Wilson

John I. Wilson, a long-time special education teacher and Association leader, became executive director of the National Education Association on November 1, 2000. The nation's largest teachers union, NEA also represents education support professionals, higher education faculty, school administrators, retired educators, and education students who plan to become teachers. In all, NEA has 3.3 million members, a staff of 555, and an annual budget exceeding $300 million.

Since coming to NEA, Wilson has championed a minimum salary of $40,000 for every teacher and a living wage for Education Support Professionals (ESP). He also launched an NEA initiative to engage the best teachers in sharing ideas on staffing high-poverty, low achieving schools with the most accomplished teachers.

Wilson has chaired the Partnership for 21st Century Skills, a coalition of 33 businesses and education groups that advocates for every child in America to graduate from high school with 21st century skills. The 3E Institute presented him with the Educator 500 President's Award in 2006 for being “a true entrepreneurial educator.” Wilson has also chaired the Learning First Alliance, a partnership of 18 leading education organizations with more than 10 million members dedicated to improving student learning in America’s public schools.

Prior to assuming the highest staff position at NEA headquarters, Wilson served the Association as President and executive director of the North Carolina Association of Educators (NCAE). With Wilson at the helm of this NEA state affiliate, NCAE strengthened teacher training systems, professional development programs, teacher compensation, and teacher recruitment. His accomplishments include the development of new support systems for teachers pursuing certification by the National Board for Professional Teaching Standards. As a result, today North
Carolina has more National Board-certified teachers and candidates than any other state. In addition, Wilson led a successful campaign that raised North Carolina teacher salaries from 43rd to 23rd in the nation, and he helped establish the North Carolina Teacher Academy, a state-funded program that provides high-quality teacher professional development.

Wilson has been an NEA activist since his days at Western Carolina University, where he served as President of the NEA student chapter. As a middle school teacher of special needs students, Wilson was an active Association leader throughout his 20-year teaching career. He served as President of the Raleigh Association of Classroom Teachers and the Wake County Association of Classroom Teachers, and also served on the NEA Board of Directors and the NEA Executive Committee.

A true North Carolinian, Wilson was born in Burlington, North Carolina. He graduated with a Bachelor of Science degree in education and received a master's degree in education from the University of North Carolina.

Wilson loves mystery novels and is a voracious reader. He "lives and breathes politics" and is an avid Tar Heel fan.
Staff Bios

Henry E. Simmons, M.D., M.P.H., F.A.C.P., President

Henry Simmons, M.D., M.P.H., F.A.C.P., served as President and CEO of the National Coalition on Health Care from the organization's inception in 1990 until this year when he recruited Ralph G. Neas as CEO.

Before founding the Coalition, Dr. Simmons held a variety of distinguished posts in both the public and private sectors. During the Nixon and Ford administrations, Dr. Simmons served as deputy assistant secretary for health at the Department of Health, Education and Welfare (HEW), director of the Office of Professional Standards Review at HEW, and director of the Bureau of Drugs at the Food and Drug Administration (FDA). President Reagan appointed Dr. Simmons as one of two physician members to serve on the Grace Commission.

Immediately following his federal service, Dr. Simmons became a senior vice President at the J. Walter Thompson Company. Dr. Simmons has also held the posts of President and chief executive officer of the Hunterdon Medical Center, Flemington, New Jersey, as well as senior vice President and director of the Health Care Division of Sears World Trade, Inc. In addition, Dr. Simmons was director of the Health and Medical Consulting Division at Peat, Marwick, Mitchell & Company.

Dr. Simmons has been associated with numerous universities and medical centers across the country. He was appointed visiting research professor at the George Washington University School of Business and Government; served as faculty member and consultant in rheumatic diseases and internal medicine at Tufts New England Medical Center; professor of community and family medicine at Rutgers University School of Medicine; assistant clinical professor of medicine at Georgetown University; and associate professor of medicine at the George Washington University School of Medicine.

Throughout his career, Dr. Simmons has testified before the U.S. Senate and the U.S. House of Representatives. Dr. Simmons has received frequent recognition for his service in both the private and public sectors. Among his honors have been the FDA Award of Merit, the HEW Certificate of Merit, and the Annual Oliver Wendell Holmes Society Lectureship.

Dr. Simmons received undergraduate and medical degrees at the University of Pittsburgh and a Master of Public Health degree from Harvard University.
Mark A. Goldberg, Executive Vice President

Mark A. Goldberg serves as Executive Vice President at the National Coalition on Health Care. Goldberg is also Vice Chairman of the Climate Institute, a non-profit research and educational organization focused on global climate change.

At the Yale School of Management as the Lester Crown Visiting Professor of Management and then as Distinguished Faculty Fellow, he taught courses on health care policy and business strategy, strategic management, political analysis, communications strategy, and entrepreneurship in the non-profit sector. He has been a consultant to the Robert Wood Johnson Foundation; the Brookings Institution; the Carnegie Foundation for the Advancement of Teaching; the Center for Studying Health System Change; and the Annenberg Rural Challenge.

Goldberg was previously the Director of Public Affairs for the international management consulting firm of McKinsey & Company and Publisher of the McKinsey Quarterly, a widely circulated journal on business strategy. At the Brookings Institution in Washington, he was Editor and Publisher of the Brookings Review and the think tank’s Development Officer.

He was a member of the White House staff during the Carter administration, where he worked on regulatory reform, telecommunications, consumer protection, and environmental issues. He also served on the Director’s staff at the President’s Reorganization Project.

Goldberg’s articles on health care and other issues have appeared in a variety of publications, including the New England Journal of Medicine, Health Affairs, the Journal of Health Politics, Policy and Law, the Yale Law Journal, the Washington Post, the Los Angeles Times, and the Wall Street Journal.

Joel E. Miller, Senior Vice President

Mr. Miller is Senior Vice President for the National Coalition on Health Care. In this capacity, Mr. Miller is responsible for member outreach, education and planning, and federal and state advocacy.

Mr. Miller was previously Director of NAMI’s Policy Research Institute, which is dedicated to addressing mental illness issues across the lifespan. In that role, he assessed state and federal policy initiatives affecting mental health financing and services, developed policy recommendations, and directed the process of creating reports, testimony,
speeches and other publications. He also served as Director of NAMI’s Veterans Council and Scientific Council.

From 1997 to 2002, Mr. Miller was Director of Policy for the National Coalition on Health Care. In that capacity, he developed assisted in the development of policy positions on addressing the uninsured problem, health care costs and quality of care issues. Mr. Miller authored and co-authored several reports on these issues and organized forums for the media and policymakers on the findings generated from the reports.

Mr. Miller served as Director of Professional Relations at the Health Insurance Association of America (HIAA) where he organized and managed HIAA’s Medical Practice Assessment Unit. HIAA is now America’s Health Insurance Plans. He was responsible for developing policy recommendations on health care technology assessment and quality of care issues. Mr. Miller was also Director of the Illinois Health Care Coalition sponsored by HIAA, which served as a forum for employers, unions, insurers and provider groups to advance cost containment and quality assurance initiatives.

Mr. Miller has served on advisory committees on delivery, financing, reimbursement and quality of care issues to the Centers for Medicare and Medicaid Services, Department of Labor, American College of Cardiology, Institute of Medicine, National Conference of State Legislatures, Council of State Governments, American Medical Association, American Hospital Association, and the National Association of State Mental Health Program Directors.

Mr. Miller has written over 50 published articles on health care reform, health insurance, access to care, Medicare and Medicaid, medical practice assessment, physician and hospital reimbursement, access to prescription drugs, total quality management in health care and mental health care delivery and financing issues.

Kendra L. Janevski, Director of Administration

Kendra Janevski, the Director of Administration, joined the Coalition management team in March 2009. She holds a Master’s of Arts in International Administration from the University of Denver and a Bachelor of Liberal Arts from Bard College. She has close to 10 years of experience working to support and develop organizations in the non-profit sector and is a recent transplant to Washington D.C.

Prior to moving to the area, Ms. Janevski lived in the Republic of Macedonia where she served in the US Peace Corps and worked on several USAID and OSCE funded projects. While her focus was primarily on assisting struggling non-governmental organizations to effect change in
their local community, she also worked with governmental and business sectors in rural communities. Her varied background and experience has helped her become a true asset to the Coalition administration.

_Brenda Girton-Mitchell, Senior Advisor on Faith Initiatives_

See page 12

_Misuzu Yamada, Communications Coordinator_

Ms. Yamada is responsible for coordinating communications with the press, tracking daily media coverage of NCHC and the issue of health care overall, and maintaining the NCHC website. In addition, Ms. Yamada assists in planning and organizing Coalition meetings, Board meetings and other associated events.

Prior to starting at NCHC, Ms. Yamada worked in various public relations and customer service positions in both her home country of Japan and in the United States. She has worked as a Manager for VIP Customer Service at an exclusive Washington, DC hotel, as a public and government affairs associate for a Japanese trading company, and as a First Class Flight Attendant for a major Japanese airline. She has significant experience in tactical public relations.

Ms. Yamada graduate Cum Laude from George Mason University with a B.A. in Communications/Public Relations.

_Caryn S. Kaufman, Events Coordinator_

Caryn S. Kaufman joined our executive staff as the NCHC events coordinator. Ms. Kaufman managed work related to all four Kellogg supported community forums and related efforts to encourage the dialogue about comprehensive health care reform. She currently handles logistics and was instrumental in generating local media coverage for the forums. Ms. Kaufman is a seasoned communications professional with expertise in public affairs, crisis control and project management. As a communications director for the Office of the Mayor for the City of Bridgeport, she worked closely with the mayor and coordinated local government meetings and media events. She also worked for We Media, Inc., based in New York City, as the Director of Corporate Communications and Government Affairs. She provides strategic and crisis communications counsel as well as commercial branding strategies for companies such as Microsoft.
Emmanuel Adepoju, IT Administrative Assistant

As an IT Administrative Assistant, Mr. Adepoju is responsible for all Tier 1 and Tier 2 troubleshooting and maintenance of all in-office equipment and software, in addition to providing administrative support for all on-going projects. Mr. Adepoju has coached on various youth sports teams in an effort to help guide and build leadership qualities in under privileged youths in his community. Currently, Mr. Adepoju is a student at the University of Maryland, University College pursuing a degree in Business and Management with a focus on Management Studies as well as a certificate in Database Management and Project Management for IT Professionals.

John Kane, Associate for Policy Analysis

John Kane joined the National Coalition on Health Care in May 2009, as NCHC’s Policy Analyst and Political Strategy Associate. Mr. Kane has examined the potential impact of various health care reform policies on the sustainability of such reform packages and aided in the development of the Coalition’s strategies for gaining the support of moderate and conservative members of Congress for policies and programs aligned with the Coalition’s overall mission. He has also represented the Coalition at a variety of stakeholder meetings hosted by Congressional leaders.

Kane holds a master’s degree in Philosophy from Virginia Tech and is currently pursuing a master’s in Public Administration through the Center for Public Administration and Policy at Virginia Tech, with concentrations in Policy Analysis and Policy Systems Management. Kane’s research interests lie in the areas of education and health policy, and he has written extensively on issues related to bioethics and the public interest. He is currently writing a treatise on the increased regresses of federal and state taxation policies resulting from the technology gap between urban and rural America.

Mary Ann Nguyen, Associate for Legal and Policy Analysis

Mary Ann Nguyen joined the National Coalition on Health Care in May 2009, as an associate with a focus on legal and public policy analysis. Ms. Nguyen brings a breadth of diverse experiences to NCHC, where she is analyzing the impact of proposed legislative and health public policy issues on minority and underserved communities, as well as examining other issues related to disparate health care delivery. She is from Santa Clara, California, and is entering her second year as a graduate law student at Santa Clara University’s School of Law. She has previously worked in the corporate world for Bank of America and Cepheid. At Bank of America, she worked in the Premier Banking and Investments division as a compliance auditor to ensure regulatory compliance with federal anti-money laundering provisions. Ms. Nguyen also handled contractual agreements with private health care industries and government organizations at Cepheid, a biotechnology company based in Sunnyvale, California.
Monica Holloway, Associate for Policy Analysis

Monica V. Holloway graduated from Cornell University, College of Human Ecology, Ithaca, NY in May 2009 with a Bachelor of Science in Policy Analysis and Management and concentrations in Health Policy & Law and Society. Her interests and expertise include policy analysis, statistics, microeconomics and health and wellness inequalities. She previously was an intern research associate with Maya Tech Cooperation working on projects related to tobacco control, cancer disparities, and limited English populations and is to be cited as co-author on related CDC State Net fact sheets. Last year she interned with for a semester with the Kaiser Family Foundation conducting research for to the Medicare Policy Project team. As a member of the selective Cornell Urban Scholars Program, she coordinated youth workshops on sexual health, financial planning, and decision making and organized a Health and Wellness Fair for approximately 500 residents of one of New York City's poorest communities.

Julie Bromberg, Associate for Health Education and Public Awareness

Julie Bromberg joined the National Coalition on Health Care as a Health Education and Public Awareness Advisor. Ms. Bromberg has a background in public health and is primarily responsible for assessing health disparities and current health promotion efforts, as well as the impact that proposed policies may have on disparities and prevention initiatives. She has been the primary author of several new and updated fact sheets and data reports. She is currently a degree candidate for a MHS in Health Education and Health Communication at the Johns Hopkins School of Public Health. Prior to graduate school, Ms. Bromberg worked as a health educator in East Boston, Massachusetts, focusing on childhood obesity and HIV prevention.

Janelle Huelsman, Associate for Public Advocacy and Strategy

Janelle Huelsman, joined the National Coalition on Health Care to assist with grassroots and grasstops communication, media outreach and social media strategy, managing the launch of NCHC's presence on Twitter and Facebook. Ms. Huelsman has worked as a city reporter for Ohio University's student newspaper, The Post, and has served as intern at O'Bleness Memorial Hospital, Ohio University Communications and Marketing and SBC Advertising. Ms. Huelsman led public relations efforts for Scoop08 (now Scoop44), the first-ever online national newspaper by and for college students, which had an emphasis on the 2008 election season. She studied at the E.W. Scripps School of Journalism, majoring in public relations with a minor in political science and a certificate from the Ohio University Global Leadership Center. As a student in the Ohio University Global Leadership Center, she worked on research projects for
several international organizations, including the U.S. Embassy in Bangkok, Thailand, the United Nations Development Program in Liberia and the Harvard University Pluralism Project. Ms. Huelsman is also the current National Vice President of Advocacy for the Public Relations Student Society of America.

**Amelia West, Associate for Administration**

Amelia West joined the Coalition to assist with administrative tasks. A recent graduate of the George Washington University, she holds a BA in Public Policy with specific focus in health care policy; Ms. West also minored in Sociology, where she concentrated in poverty and urban studies. A native of Westport, Connecticut, Ms. West founded the non-profit “Kakes for Kids” which delivers birthday cakes to kids in homeless shelters and remains deeply committed to issues of poverty and education among children.

**Catherine Doyle, Public Advocacy and Strategy Associate**

Catherine Doyle serves as a Public Advocacy and Strategy Associate for the National Coalition on Health Care. A recent graduate from Sargent College at Boston University, she received a B.S. degree in Health Science. Ms. Doyle previously worked for the Massachusetts Coalition of School-Based Health Centers and was actively involved in the recent Boston City Council race.
Member Organizations and Affiliates

**AARP**

AARP’s mission is to enhance the quality of life for all as we age, leading positive social change and delivering value to members through information, advocacy and service. They believe strongly in the principles of collective purpose, collective voice, and collective purchasing power, and these principles guide all organization efforts. AARP’s vision is a society in which everyone ages with dignity and purpose, and in which AARP helps people fulfill their goals and dreams.

**AFL-CIO**

The mission of the AFL-CIO is to improve the lives of working families – bring economic justice to the workplace and social justice to the nation. To accomplish this mission, their goal is to build and change the American labor movement.

**American Academy of Family Physicians**

The mission of the AAFP is to improve the health of patients, families, and communities by serving the needs of members with professionalism and creativity.

**American Academy of Pediatrics**

The mission of the AAP is to attain optimal physical, mental, and social health and well-being for all infants, children, adolescents, and young adults. To accomplish this mission, the AAP supports the professional needs of its members.

**American Association of Birth Centers**

The American Association of Birth Centers is a non-profit membership organization founded by Childbirth Connection (formerly the Maternity Center Association) under a grant from the John A. Hartford Foundation of New York. For 25 years, the American Association of Birth Centers has been the nation's most comprehensive resource on birth centers.

**American Association of Community Colleges**

AACC is the primary advocacy organization for community colleges at the national level and works closely with directors of state offices to inform and affect state policy. In addition, AACC is a member of "The Six" large, presidentially based associations and collaborates with a wide
range of entities within the higher education community to monitor and influence federal policy and to collaborate on issues of common interest. The association has ongoing interaction with key federal departments and agencies including the U.S. departments of Labor, Education, Energy, Homeland Security, and Commerce and the National Science Foundation.

Today, the association represents almost 1,200 two-year, associate degree–granting institutions and more than 11 million students, as well as a growing number of international members in Puerto Rico, Japan, Great Britain, Korea, and the United Arab Emirates. The colleges are the largest and fastest-growing sector of U.S. higher education, enrolling close to half (46 percent) of all U.S. undergraduates.

**American Association of State Colleges and Universities**

AASCU schools enroll more than three million students or 56 percent of the enrollment at all public four-year institutions. The American Association of State Colleges and Universities was established in 1961 in response to: "The growing impact of the federal government on higher education, particularly as it related to research grants and other grants-in-aid, had made it absolutely necessary that a strong national association be formed to represent the interests of students in state colleges and universities." AASCU grew out of the Association of Teacher Education Institutions organized in 1951 to serve public comprehensive institutions most of them having begun as single purpose institutions, most of them normal schools.

**American Cancer Society**

The American Cancer Society is the nationwide, community-based, voluntary health organization dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives, and diminishing suffering from cancer, through research, education, advocacy, and service.

**American College of Cardiology**

The mission of the American College of Cardiology is to advocate for quality cardiovascular care – through education, research promotion, development and application of standards and guidelines – and to influence health care policy.

**American College of Emergency Physicians**

The American College of Emergency Physicians (ACEP) is the oldest and largest national medical specialty organization representing physicians who practice emergency medicine. With nearly 27,000 members, ACEP is the leading continuing education source for emergency physicians and the primary information resource on developments in the specialty. Founded in 1968, ACEP achieved a major milestone in 1979 when emergency medicine was recognized as the nation's 23rd medical specialty by the American Board of Medical Specialties (ABMS). The independent certifying body for the specialty, the American Board of Emergency Medicine was installed at that time as a member of the ABMS.
The College continually monitors trends in the health care environment and analyzes issues affecting emergency physicians and their patients

**American College of Nurse Midwives**

With roots dating to 1929, the American College of Nurse-Midwives (ACNM) is the oldest women's health care organization in the U.S. ACNM is the professional association that represents Certified Nurse-Midwives and Certified Midwives in the United States. ACNM provides research, administers and promotes continuing education programs, establishes clinical practice standards, creates liaisons with state and federal agencies and members of Congress.

The mission of ACNM is to promote the health and well-being of women and infants within their families and communities through the development and support of the profession of midwifery as practiced by certified nurse-midwives, and certified midwives. The philosophy inherent in the profession states that nurse-midwives believe every individual has the right to safe, satisfying health care with respect for human dignity and cultural variations.

**American College of Surgeons**

The American College of Surgeons is a scientific and educational association of surgeons that was founded in 1913 to improve the quality of care for the surgical patient by setting high standards for surgical education and practice. ACS represents over 70,000 members, including more than 4,000 Fellows in other countries, making it the largest organization of surgeons in the world.

**American Council on Education**

ACE, the major coordinating body for all the nation's higher education institutions, seeks to provide leadership and a unifying voice on key higher education issues and to influence public policy through advocacy, research, and program initiatives.

**American Dental Education Association**

The mission of ADEA is to lead individuals and institutions of the dental education community to address contemporary issues influencing education, research, and the delivery of oral health care for the health of the public. ADEA's activities encompass a wide range of research, advocacy, faculty development, meetings, and communications like the Journal of Dental Education, as well as the dental school admissions services.

**American Federation of State, County and Municipal Employees (AFSCME)**

The mission of the union includes:
- Organizing workers in general, public employees in particular,

- Promoting the welfare of AFSCME members and providing a voice in determining the terms and conditions of employment by using the collective bargaining process, as well as legislative and political action,

- Promoting civil service legislation and career service in government, and

- Assisting AFSCME members and affiliates through research and education.

**American Federation of Teachers**

The mission of the American Federation of Teachers is to improve the lives of their members and their families, to give voice to their legitimate professional, economic and social aspirations, to strengthen the institutions in which they work, to improve the quality of the services they provide, to bring together all members to assist and support one another and to promote democracy, human rights and freedom in the union, in the nation and throughout the world.

**American Federation of Television and Radio Artists**

The American Federation of Television and Radio Artists, is a national labor union of over 70,000 actors, singers and recording artists, dancers, announcers and other broadcast talent performers, journalists, and other artists working in the entertainment and news media. With more than 30 local chapters across the country, AFTRA promotes the success and welfare of members in a variety of ways, including contract negotiation and enforcement, advocating on legislative and public policy issues, supporting equal employment opportunities, and sponsoring or supporting health and retirement benefits and programs.

**American Heart Association**

The association's impact goal is to reduce coronary heart disease, stroke and risk by 25 percent by 2010. Progress toward the impact goal will be measured based on these indicators:

- Reduce the death rate from coronary heart disease and stroke by 25 percent,

- Reduce the prevalence of smoking, high blood cholesterol and physical inactivity by 25 percent,

- Reduce the rate of uncontrolled high blood pressure by 25 percent, and
• Eliminate the growth of obesity and diabetes.

American Legacy Foundation

The national, independent public health Foundation was created in 1999 out of the landmark Master Settlement Agreement (MSA) between the tobacco industry, 46 state governments and five U.S. territories. It is located in Washington, D.C. and is a 501(c)(3) non-profit organization.

The Foundation develops programs that address the health effects of tobacco use. The focus is on vulnerable populations – youth, low-income Americans, the less educated, and racial, ethnic and cultural minorities.

The Foundation also works through grants, technical assistance and training, partnerships, youth activism, and counter-marketing and grassroots marketing campaigns.

American Lung Association

Now in its second century, the American Lung Association is the leading organization working to save lives, improve lung health and prevent lung disease. With your generous support, the American Lung Association is “Fighting for Air” through research, education and advocacy. The American Lung Association has many programs and strategies for fighting lung disease, such as tobacco control programs.

Asian and Pacific Islander American Health Forum

The 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.

Association of American Medical Colleges and Teaching Hospitals

The AAMC is a not-for-profit association representing all medical schools in the United States and Canada that grant the M.D. degree and are accredited by the Liaison Committee on Medical Education; major teaching hospitals and health systems, including Department of Veteran Affairs medical centers; and academic and professional societies. Through these institutions and organizations, the AAMC represents the leadership of the nation’s medical schools and teaching hospitals, as well as faculty members, medical students and resident physicians. The mission of the AAMC is to serve and lead the academic medicine community to improve the health of all.

Association of American Universities
The Association of American Universities is a nonprofit association of 60 U.S. and two Canadian preeminent public and private research universities. Founded in 1900, AAU focuses on national and institutional issues that are important to research-intensive universities, including funding for research, research and education policy, and graduate and undergraduate education.

Breast Cancer Network of Strength

Breast Cancer Network of Strength, formerly known as Y-ME National Breast Cancer Organization®, provides immediate emotional relief to anyone affected by breast cancer. The mission of Breast Cancer Network of Strength is to ensure, through information, empowerment and peer support, that no one faces breast cancer alone.

YourShoes™ is Breast Cancer Network of Strength's peer support program that includes a 24/7 breast cancer support center staffed by trained breast cancer survivors providing peer support through a toll-free hotline, e-mail and support groups.

C-Change

The mission of C-Change is to eliminate cancer as a public health problem, at the earliest possible time, by leveraging the expertise and resources of their members.

CalPERS

CalPERS mission is to advance the financial and health security for all who participate in the system. They fulfill this mission by creating and maintaining an environment that produces responsiveness to all those they serve. CalPERS serves more than 1.4 million members and retirees.

California State Teachers’ Retirement System

CalSTRS’ mission is to secure the financial future and sustain the trust of California's educators.

Children’s Defense Fund

CDF is the foremost national proponent of policies and programs that provide children with the resources they need to succeed. We champion 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 our inception, the Children's Defense Fund has challenged the United States to raise its standards by improving policies and programs for children. Over the years, we have 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. We let the public know how effectively their elected officials stand up for children. Through this work, we have influenced the child policy agenda and helped define the results for which we, as a nation, should strive.
CodeBlueNow

The mission of CodeBlueNow is to create strong public will for change by engaging the public in designing, shaping and promoting a template for a new health care system.

Colorado Public Employee Retirement Association

PERA provides retirement and other benefits to the employees of more than 400 government agencies and public entities in the state of Colorado. PERA is the 23rd largest public pension plan in the United States.

Established by State law in 1931, PERA operates by authority of the Colorado General Assembly and is administered under Title 24, Article 51 of the Colorado Revised Statutes. In accordance with its duty to administer PERA, the Board of Trustees has the authority to adopt and revise Rules in accordance with state statutes. Its membership includes employees of the Colorado state government, most teachers in the state, many university and college employees, judges, many employees of cities and towns, state troopers, and the employees of a number of other public entities.

Common Cause

Common Cause is a nonpartisan, nonprofit advocacy organization founded in 1970 by John Gardner as a vehicle for citizens to make their voices heard in the political process and to hold their elected leaders accountable to the public interest.

Today, Common Cause is one of the most active, effective, and respected nonprofit organizations working for political change in America. Common Cause strives to strengthen our democracy by empowering our members, supporters and the general public to take action on critical policy issues.

Now with nearly 400,000 members and supporters and 36 state organizations, Common Cause remains committed to honest, open and accountable government, as well as encouraging citizen participation in democracy.

Communications Workers of America, AFL-CIO

CWA, America’s largest communications and media union, represents over 700,000 men and women in both private and public sectors, including over half a million workers who are building the Information Highway.

CWA members are employed in telecommunications, broadcasting, cable TV, journalism, publishing, electronics and general manufacturing, as well as airline customer service, government service, health care, education and other fields.

The union includes some 1,200 chartered local unions across the United States, Canada and Puerto Rico. Members live in approximately 10,000 communities, making CWA one of the most geographically diverse unions.
Consortium for Citizens with Disabilities

The Consortium for Citizens with Disabilities is a Coalition of national consumer, advocacy, provider and professional organizations headquartered in Washington, D.C. Since 1973, the CCD has advocated on behalf of people of all ages with physical and mental disabilities and their families. CCD has worked to achieve federal legislation and regulations that assure that the 54 million children and adults with disabilities are fully integrated into the mainstream of society. The Consortium for Citizens with Disabilities (CCD) envisions an American society in which all individuals, aided by an enabling government, have the freedom and opportunity to exercise individual decisions concerning their own lives, welfare and personal dignity.

CCD envisions a society in which communities are fully accessible to all individuals with disabilities and their families, where they are included and fully participate in all aspects of community life.

Consumers Union

Consumers Union (CU) is an expert, independent, nonprofit organization founded in 1936. CU publishes Consumer Reports, one of the top-ten-circulation magazines in the country, and ConsumerReports.org, which has the most subscribers of any Web site of its kind, in addition to two newsletters, Consumer Reports on Health and Consumer Reports Money Adviser. They have combined subscriptions of more than 8 million.

Consumers Union employs a dedicated staff of lobbyists, grassroots organizers, and outreach specialists who work with the organization’s more than 600,000 online activists to change legislation and the marketplace in favor of the consumer interest.

Duke Energy Corporation

Duke’s mission is to make people’s lives better by providing gas and electric services in a sustainable way. This mission requires Duke to constantly look for ways to improve, to grow and to reduce their impact on the environment.

Duke University Medical Center

The youngest of the nation’s leading medical schools, Duke is one of the world’s premier centers for medical education, clinical care and biomedical research. Now, more than 75 years later, the Duke University School of Medicine is firmly in the top 10 medical schools nationally. The medical campus encompasses 90 buildings on 210 acres and employs over 1,500 faculty physicians and researchers.

Easter Seals

Easter Seals has been helping individuals with disabilities and special needs, and their families, live better lives for nearly 90 years. From child development centers to physical rehabilitation and job training for people
with disabilities, Easter Seals offers a variety of services to help people with disabilities address life's challenges and achieve personal goals.

Easter Seals offers help, hope and answers to more than a million children and adults living with autism and other disabilities or special needs and their families each year. Services and support are provided through a network of more than 550 sites in the U.S. and through Ability First Australia. Each center provides exceptional services that are individualized, innovative, family-focused and tailored to meet specific needs of the particular community served.

The Episcopal Church

The Episcopal Church strives to live by the message of Christ, in which there are no outcasts and all are welcome. Walking a middle way between Roman Catholicism and Protestant traditions, we are a sacramental and worship-oriented church that promotes thoughtful debate about what God is calling us to do and be, as followers of Christ.

Exelon Corporation

Exelon's goal is to reduce, offset or displace more than 15 million metric tons of greenhouse gas emissions per year by 2020. This is more than their current annual carbon footprint and is equivalent to taking nearly 3 million cars off our roads and highways.

Exelon has been going through several changes and had no specific comments on policy issues.

Giant Food, Inc.

Giant-Landover is one of the leading supermarket brands in the Washington D.C. area and a committed partner to the communities it serves. The company operates more than 180 supermarkets in Virginia, Maryland, Delaware, and the District of Columbia, and employs over 22,000 people.

Gross Electric, Inc.

Since 1910 Gross Electric has been one of Northwest Ohio & Southeast Michigan’s leading independent electrical and lighting distributors. Our lighting showrooms and electrical counters service a wide range of contractor, commercial, institutional and retail customers. Our product depth, breadth and the knowledge of our sales staff can provide you with the solutions for all your electrical needs. Gross Electric’s electrical supply division stocks over 35,000 products from 150 manufacturers.

Illinois Municipal Retirement Fund

The Illinois Municipal Retirement Fund was created in 1939 by the Illinois General Assembly and began operating in 1941 with 5 original employers and $5,000 in assets. Today IMRF serves approximately 2,900 employers and has approximately $24 billion in assets.
Since 1941, IMRF has provided employees of local governments and school districts in Illinois (with the exception of the City of Chicago and Cook County) with a sound and efficient system for the payment of retirement, disability, and death benefits.

As of December 2007, IMRF counted 177,783 active members, 86,362 benefit recipients, and 2,926 local units of government in Illinois.

**International Brotherhood of Electrical Workers**

The International Brotherhood of Electrical Workers (IBEW) represents approximately 750,000 members who work in a wide variety of fields, including utilities, construction, telecommunications, broadcasting, manufacturing, railroads and government.

**International Brotherhood of Teamsters**

The Teamsters Union is made up of 1.4 million workers who are employed in a variety of public and private industries. There are approximately 500,000 retired members of the Teamsters throughout the United States and Canada who maintain their affiliation with the Union and support important issues for working people.

**International Federation of Professional & Technical Engineers (IFPTE)**

The IFPTE’s mission is to allow tens of thousands of men and women working in professional and technical occupations a collective voice on the job. They give members an effective voice in the legislative process. All of their members are affected by our international, national, state and provincial legislatures in one manner or another. They advance issues that affect working families and assist candidates for government who advance those concerns unique to their membership. They raise the standards by which all professional and technical workers are employed.

**International Foundation of Employee Benefit Plans**

The International Foundation of Employee Benefit Plans is a nonprofit organization, dedicated to being a leading objective and independent global source of employee benefits, compensation, and financial literacy education and information.

**Iowa Farm Bureau**

On Dec. 27, 1918, the Iowa Farm Bureau was born. While much has changed since then, one thing hasn’t: the character of Farm Bureau and its more than 153,000-member families – a character rooted in timeless values like hard work, love of community, a passion for the land and a belief rooted in faith and family.

Farm Bureau is a unique and highly successful organization because it’s in business to serve members. The organization’s services, programs and benefits are developed based on the causes, concerns and needs important to members based on their beliefs and values – from
leadership development, savings on preventative health care services and farm marketing seminars to programs to help young farmers thrive and prosper.

By reflecting the values of Iowans and its members and holding true to its mission of helping farm families prosper and improving their quality of life, Farm Bureau continues to grow stronger. Membership continues to grow, proof that Farm Bureau is offering the kind of programs and service that Iowans have come to expect and value.

**Japanese American Citizen League**

Founded in 1929, the JACL is the oldest and largest Asian American civil rights organization in the United States. The JACL monitors and responds to issues that enhance or threaten the civil and human rights of all Americans and implements strategies to effect positive social change, particularly to the Asian Pacific American community.

Looking to our future, the JACL constantly assesses the effectiveness of its role in Japanese American, Asian Pacific American and civil rights communities, and what infrastructure is necessary to effectively support our mission and efficiently achieve our goals. Today, with interracial and multi-ethnic marriages changing the face of the Japanese American community, the JACL faces additional challenges in looking to its future and to the future of the Japanese American community.

**Johns Hopkins University School of Medicine**

The mission of Johns Hopkins Medicine is to improve the health of the community and the world by setting the standard of excellence in medical education, research and clinical care. Johns Hopkins educates medical students, scientists, health care professionals and the public; conducts biomedical research; and provides patient-centered medicine to prevent, diagnose and treat human illness.

**League of Women Voters**

The League of Women Voters, a nonpartisan political organization, works to increase understanding of major public policy issues, and influences public policy through education and advocacy.

Since 1920, the League of Women Voters has operated as a grassroots organization, working at the national, state and local levels.

There are Leagues in all 50 states, the District of Columbia, Puerto Rico, the Virgin Islands and Hong Kong, in addition to the hundreds of local Leagues nationwide. The League of Women Voters of the United States and the League of Women Voters Education Fund operate at the national level with grassroots support from state and local Leagues.

The League of Women Voters is strictly nonpartisan; it neither supports nor opposes candidates for office at any level of government. At the same time, the League is wholeheartedly political and works to influence policy through advocacy. It is the original grassroots citizen network,
directed by the consensus of its members nationwide. The 900 state and local Leagues – comprising a vast grassroots lobby corps that can be mobilized when necessary.

**Childbirth Connection*/formerly Maternity Center Association**

Childbirth Connection is a national not-for-profit organization founded in 1918 as Maternity Center Association. Our mission is to improve the quality of maternity care through research, education, advocacy and policy. Childbirth Connection promotes safe, effective and satisfying evidence-based maternity care and is a voice for the needs and interests of childbearing families.

**Michigan Health & Hospital Association**

The Michigan Health & Hospital Association (MHA) is the statewide leader representing all of the 144 community hospitals in Michigan. Established in 1919, the MHA represents the interests of its member hospitals and health systems in both the legislative and regulatory arenas on key issues and supports their efforts to provide quality, cost-effective and accessible care.

The MHA continually provides a strategic assessment of emerging health care trends to help its members develop a framework to meet current and future needs of their communities.

**National Association for the Advancement of Colored People (NAACP)**

Founded Feb. 12, 1909, the NAACP is the nation's oldest, largest and most widely recognized grassroots–based civil rights organization. Its more than half-million members and supporters throughout the United States and the world are the premier advocates for civil rights in their communities, conducting voter mobilization and monitoring equal opportunity in the public and private sectors.

The mission of the National Association for the Advancement of Colored People is to ensure the political, educational, social, and economic equality of rights of all persons and to eliminate racial hatred and racial discrimination.

**National Association of Chain Drug Stores**

NACDS provides a wide range of services to meet the needs of the chain drug industry in accordance with its goals and objectives.

**National Association of Independent Colleges and Universities**

The National Association of Independent Colleges and Universities (NAICU) serves as the unified national voice of independent higher education. Since 1976, the association has represented private colleges and universities on policy issues with the federal government, such as those affecting student aid, taxation, and government regulation. Today, through new communication technologies, an improved governance structure, and increased member participation, NAICU has become an even more effective and respected participant in the political process.
The NAICU staff meets with policymakers, tracks campus trends, conducts research, analyzes higher education issues, publishes information, helps coordinate state-level activities, and advises members of legislative and regulatory developments with potential impact on their institutions. In addition, NAICU has spearheaded several major public initiatives, such as the Student Aid Alliance, an ambitious effort to enhance funding for existing student aid programs; and the nonpartisan National Campus Voter Registration Project that, in the last three congressional elections, has helped member institutions conduct both voter education programs and campaigns to register students and employees.

With nearly 1,000 members nationwide, NAICU reflects the diversity of private, nonprofit higher education in the United States. Members include traditional liberal arts colleges, major research universities, church- and faith-related institutions, historically black colleges and universities, women's colleges, performing and visual arts institutions, two-year colleges, and schools of law, medicine, engineering, business, and other professions. NAICU is committed to celebrating and protecting this diversity of the nation's private colleges and universities.

**National Community Action Foundation**

The National Community Action Foundation (NCAF) is a private, non-profit organization which serves as an advocate and lobbyist for low-income programs. Founded in 1981, NCAF members are Community Action Agencies (CAAs) and State and regional associations of CAAs. NCAF is governed by an elected, volunteer board of Directors.

NCAF works closely with Members of Congress, Federal and State agencies, and a variety of public interest groups to maintain adequate funding for CAA programs and to shape future policy directions. NCAF works on a broad range of issues, including: the Community Services Block Grant, welfare reform, Head Start, child care, the Low-Income Home Energy Assistance Program, workforce development, housing and shelter for the homeless, health, nutrition, tax and income policy, and energy conservation programs.

**National Conference of Public Employee Retirement Systems**

The conference’s core missions are federal advocacy, conducting research vital to the public pension community, and education of pension trustees and officials.

**National Consumers League**
The National Consumers League is a private, nonprofit advocacy group representing consumers on marketplace and workplace issues. We are the nation's oldest consumer organization.

NCL provides government, businesses, and other organizations with the consumer's perspective on concerns including child labor, privacy, food safety, and medication information. Our mission is to protect and promote social and economic justice for consumers and workers in the United States and abroad.

National Coordinating Committee for Multi-Employer Plans

The NCCMP's mission is to assure an environment in which multiemployer plans can continue in their vital role in providing benefits to working Americans with a minimum of regulatory or other interference.

National Council of Churches of Christ in the U.S.A.

Since its founding in 1950, the National Council of the Churches of Christ in the USA has been the leading force for ecumenical cooperation among Christians in the United States. The NCC's member faith groups — from a wide spectrum of Protestant, Anglican, Orthodox, Evangelical, historic African American and Living Peace churches — include 45 million persons in more than 100,000 local congregations in communities across the nation.

National Council of La Raza

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

Founded in 1968, NCLR is a private, nonprofit, nonpartisan, tax-exempt organization headquartered in Washington, DC. NCLR serves all Hispanic subgroups in all regions of the country and has operations in Atlanta, Chicago, Los Angeles, New York, Phoenix, Sacramento, San Antonio, and San Juan, Puerto Rico.

National Council on Teacher Retirement

The purposes of the Council are to: provide guidance in the development and management of financially sound and equitable retirement plans for qualified career public employees, and to promote benefit levels for members and beneficiaries that will assure economic security; and
encourage plan directors, administrators, and trustees to: (a) provide progressive leadership and sound management to assure that plan objectives are attained; (b) identify problems that impact plan administration and devise solutions in those problems; (c) act as a catalyst in dealing with federal legislative and regulatory issues that impact plan administration.

National Education Association

NEA’s mission is to advocate for education professionals and to unite their members and the nation to fulfill the promise of public education to prepare every student to succeed in a diverse and interdependent world.

National Multiple Sclerosis Society

The National MS Society is dedicated to helping individuals suffering from multiple sclerosis. The Society helps individuals address the challenges of living with MS through their 50-state network of chapters. In addition, the Society funds cutting-edge research, drives change through advocacy, facilitates professional education, and provides programs and services that help people with MS and their families move their lives forward.

New York State Teachers’ Retirement System

NYSTRS is the second-largest public retirement system in the state and one of the 10-largest systems in the nation. We serve nearly 275,000 active members and 137,000 retirees and beneficiaries. Eligible retirees are guaranteed a monthly benefit payment for life. The Retirement System was established in 1921 by the New York State Legislature, and our benefits are paid in accordance with the laws enacted by the Legislature.

NYSTRS administers a defined benefit plan that provides retirement, disability and death benefits to eligible New York State public school teachers and administrators. Eligibility for these benefits depends on factors such as a member's tier of membership, age, earnings and service credit.

Organization of Chinese Americans

OCA is a national organization dedicated to advancing the social, political, and economic well-being of Asian Pacific Americans in the United States. Founded in 1973 as the Organization of Chinese Americans, OCA aims to embrace the hopes and aspirations Asian Pacific Americans in the United States.

OCA is engaged in organizing its over 80 chapters and college affiliates across the nation to develop both leadership and community involvement. OCA chapters and our college affiliates are establishing strong local programs in all parts of the country.

Presbyterian Church, USA
The Presbyterian Church (U.S.A.), with denominational offices in Louisville, Kentucky, has approximately 2.3 million members, more than 10,000 congregations and 14,000 ordained and active ministers.

**Religious Action Center of Reform Judaism**

The Religious Action Center of Reform Judaism is the Washington office of the Union for Reform Judaism, whose more than 900 congregations across North America encompass 1.5 million Reform Jews, and the Central Conference of American Rabbis, whose membership includes more than 1,800 Reform rabbis.

**The Salvation Army**

The Salvation Army, an international movement, is an evangelical part of the universal Christian Church. Its message is based on the Bible. Its ministry is motivated by the love of God. Its mission is to preach the gospel of Jesus Christ and to meet human needs in His name without discrimination.

**Sheet Metal Workers’ International Union, AFL-CIO**

The Sheet Metal Workers’ International Association (SMWIA) serves to protect and raise the living standards of over 150,000 skilled men and women employed throughout the United States, Canada and Puerto Rico. We work in the construction, manufacturing, service, railroad and shipyard industries.

The SMWIA strives to establish and maintain desirable working conditions for its members through their employers. Doing so provides them that measure of comfort, happiness, and security to which every member is entitled to in return for his or her highly trained and skilled labor.

**Small Business Majority**

Small Business Majority is a national nonprofit advocacy organization focused on solving the skyrocketing cost of providing healthcare to employees.

Small Business Majority is run by small business owners. The organization uses nonpartisan scientific research to understand and represent the interests of all small businesses, from sole proprietors to 100-person companies.

**Stop & Shop**

Stop & Shop is one of the leading food retailers in the northeast United States and the pioneer of the superstore concept in New England. Today the company operates over 380 stores employing approximately 60,000 employees throughout Massachusetts, Connecticut, Rhode Island, Maine, New Hampshire, New York and New Jersey. Today the company operates superstores – some of which include gas stations, full-service pharmacies and conventional
supermarkets Stop & Shop is a multibillion-dollar corporation and the largest food retailer in New England.

**TEVA Pharmaceutical Industries Ltd.**

Teva Pharmaceutical Industries Ltd. is a global pharmaceutical company specializing in the development, production and marketing of generic and proprietary branded pharmaceuticals and active pharmaceutical ingredients. Teva is among the top 20 pharmaceutical companies and among the largest generic pharmaceutical companies in the world.

With more than a century of experience in the healthcare industry, the Company enjoys a firmly established international presence, operating through a carefully tailored network of worldwide subsidiaries. Headquartered in Israel, above 80% of Teva's sales, which totaled US$ 11.1 billion in 2008, are in North America and Europe. Teva has over 38,000 employees worldwide and production facilities in Israel, North America, Europe and Latin America.

**United Food and Commercial Workers International Union**

The United Food and Commercial Workers International Union is a labor union representing approximately 1.4 million workers in the United States and Canada in many industries, including agriculture, health care, meatpacking, poultry and food processing, manufacturing, textile, G4S Security, and chemical trades, and retail food.

**United Methodist Church- General Board of Church and Society**

The General Board of Church and Society (GBCS) is one of four international general program boards of The United Methodist Church. The board shall develop, promote, and distribute resources and conduct programs to inform, motivate, train, organize, and build networks for action toward social justice throughout society, particularly on the specific issues prioritized by the board. Special attention shall be given to the nurture of the active constituency of the board. The board will encourage an exchange of ideas on strategy and methodology for social change. Through conferences, districts, coalitions, and networks, it will assist Church members as they identify and respond to critical social issues at community, regional, national, and international levels.

**United States Conference of Catholic Bishops**

The United States Conference of Catholic Bishops (USCCB) is an assembly of the hierarchy of the United States and the U.S. Virgin Islands who jointly exercise certain pastoral functions on behalf of the Christian faithful of the United States. The purpose of the Conference is to promote the greater good which the Church offers humankind, especially through forms and programs of the apostolate fittingly adapted to the circumstances of time and place. This purpose is drawn from the universal law of the Church and applies to the Episcopal conferences which are established all over the world for the same purpose.
The bishops themselves constitute the membership of the Conference and are served by a staff of over 350 lay people, priests, deacons, and religious located at the Conference headquarters in Washington, DC. There is also a small Office of Film and Broadcasting in New York City and a branch office of Migration and Refugee Services in Miami.

**U.S. PIRG**

U.S. PIRG is an advocate for the public interest. U.S. PIRG's mission is to deliver persistent, result-oriented public interest activism that protects our health, encourages a fair, sustainable economy, and fosters responsive, democratic government. The organization tackles pressing issues, such as product safety, political corruption, prescription drugs and voting rights. U.S. PIRG has a strong network of researchers, advocates, organizers and students in state capitols across the country.

**Verizon**

Since 2000, the Verizon Foundation has dedicated technical, financial and human resources to help people in communities across the country live healthy, productive lives. The Verizon Foundation focuses our efforts on two primary areas – education and literacy, and safety and health. The foundation participates in innovative programs to improve literacy and strengthen education achievement for children and adults. The foundation also supports initiatives that help prevent domestic violence and improve access to healthcare information and services.
Infrastructure Development and Capacity Building

In January 2008, as the Coalition’s Board of Directors met, the world’s financial systems were in turmoil, America’s leaders were struggling to stabilize the economy during a Presidential transition and philanthropic organizations were facing unprecedented endowment losses and escalating needs. The message from the Board was clear, good stewardship demanded that the Coalition must develop the means to do more with available resources.

Toward that end, steps were taken this year to better manage and control budget, resources, and staff in order to improve the return on membership contributions and foundation investments in the Coalition. New management tools including performance metrics, job descriptions, an organizational chart and clear strategy deployed to guide staff and organizational decision making. Coalition operations and internal procedures were standardized and business best-practices such as seeking competitive bids from vendors and conducting technology audits to identify areas of potential savings were implemented. As standard operating procedures and technology upgrades began to be adopted, previous inefficiencies, costs and delays could be avoided.

Greater transparency and information sharing enhanced collaboration and the Coalition staff was able to eliminate waste adopt more environmentally sound practices, and strengthen financial controls.

Weekly tactical meetings include review of what the staff calls the Coalition’s 5-M’s:

Mission Focus

Policy Impact: Activities and Assessment

Media: Presence/Visibility/Messaging

Membership: Development, Support and Engagement


This shorthand helps staff maintain alignment with Coalition’s priorities, budget and strategy and has been an important element of the Coalition’s Washington staff’s cultural transformation. Similarly, the development of a new employee manual, standard forms for membership applications, expenses, and contracts have streamlined operations. The utilization of full and discounted services available to non-profit organizations has also improved cost effectiveness. (See Appendix P)
Acknowledgements

The following individuals and organizations contributed to the development of this report:

**Editorial Direction**
- Henry E. Simmons
- Ralph G. Neas
- Grace L. Mastalli

**Design and Production**
- Joel Miller
- Mary Ann Nguyen
- Kendra Janevski
- Amelia West
- John Kane

**Photography**
- Mary Ann Nguyen
- Amelia West

**Proofreading**
- Janelle Huelsman
- Julie Bromberg

**Printing**
- Doyle Printing and Off-Set

NCHC is a 501 (c) (3) tax-exempt not-for-profit organization.