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**Providing health care coverage that addresses basic needs, prevention, and chronic disease concerns**

- 1 WHEREAS access to health care by our nation's older persons, people with disabilities, and medically indigent individuals has improved;
- 2 WHEREAS further cuts in fee payments to providers could reduce the pool of physicians who accept Medicare and lessen the gains in access to health care;
- 3 WHEREAS deductibles and co-payments are manageable by some but hinder access to care for others;
- 4 WHEREAS older persons and Americans of all ages with means to be responsible for themselves face barriers to affordable private health care insurance;
- 5 WHEREAS many who cannot afford out-of-pocket expenses postpone preventive care, yet preventive procedures may reduce the need for higher-cost acute care services; and
- 6 WHEREAS baby boomers start to reach age 65 in the year 2010, when the Medicare trust fund will not be adequate to meet the need;

***THEREFORE, BE IT RESOLVED by the 1995 White House Conference on Aging to support policies that:***

- 7 Support community rating and eliminate pre-existing conditions, so that older Americans can buy private health insurance as a supplement to Medicare;
- 8 Cover preventive medicine, prescriptions, vision and hearing aids, mental health services, and dental health care;
- 9 Recognize prevention as an important cost-cutting measure by providing immunizations, annual Pap smears, mammograms, nutrition screening, and other proven preventive methods through Medicare and Medicaid;
- 10 Review cost-cutting measures, especially differentials in payments to providers, to prevent negative effects on access to care, cost-shifting, and intergenerational conflicts;
- 11 Explore affordable health care coverage options for older Americans, children, and other vulnerable persons, including managed care, Health Maintenance Organizations (HMOs), and other plans that encourage private sector participation and risk-sharing.