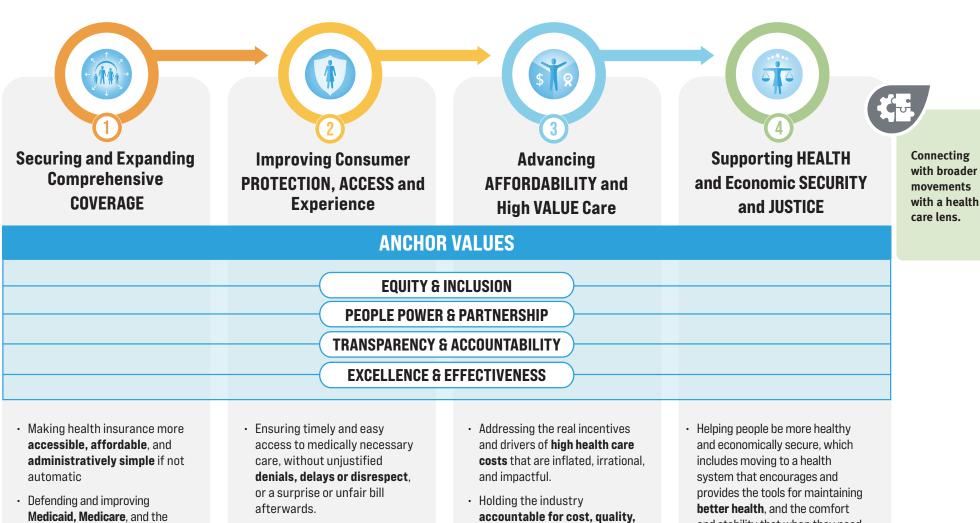
Strategic Goals & Anchor Values

HIGH-LEVEL OVERVIEW



- Medicaid, Medicare, and the ACA Marketplaces, as well as employer-based and commercial **coverage**, including by providing affordability assistance for coverage and care
- · Improving the benefits and reducing out-of-pocket costs in both public and private coverage. Ensure coverage is comprehensive to prevent underinsurance, especially regarding benefits like dental and mental health, and with regard to cost-sharing and deductibles.
- · Removing **barriers** to coverage, from income to immigration status, and moving toward the vision of universal coverage, where health care is not a privilege but a right.

- Protecting consumers from
- fraudulent, abusive, unsafe and predatory practices regarding pricing, billing, marketing, care delivery, and more, including unfair denials of care, medical errors, inadequate and ghost networks, junk coverage, and price-gouging, whether by insurers or also providers.
- Addressing specific barriers - ensuring language access, culturally competent care, accurate provider directories, adequate networks in urban and rural areas, and more.
- Encouraging **patient** engagement and empowering and institutionalizing the patient voice in health systems to, among other goals, demand better customer service and satisfaction rather than complexity and confusion.

- accountable for cost, quality, customer service, outcomes, equity, and addressing disparities, starting with greater and more detailed transparency and oversight.
- · Fixing market failures and financial incentives so that the goal is to get better, not just bigger; confronting consolidation, corporatization, and conflicts of interest in the health system.
- Developing and scaling new models of payment and care delivery that promote prevention and the right care at the right time at the right place.
- and stability that when they need health care, they can get it without significant financial barriers or repercussions - recognizing that health coverage is foundational to economic security, given the potential life-altering impact of a health bill, and how much health costs take from paychecks and other public investments.
- Recognizing the broader social determinants of health, using our credibility or capacity when it adds value to support specific tax policies and public health investments and the connections of the health system to social services and other safety-net and community solutions, including the care economy of home care and long-term care services.
- Connecting with disadvantaged **communities** and finding added-value ways to support them on health issues, to address issues of structural racism, income and economic barriers, immigration status, LGBTQ issues, women and reproductive services, disability access, rural health, and more.

