

Jason Brame

From: Milwaukee Addiction Treatment Initiative [jasonb@communityadvocates.net]
Sent: Thursday, June 25, 2009 9:35 AM
To: Jason Brame
Subject: MATI e-Newsletter -- Riemer / Enthoven New York Times Op-Ed: Congress Should Look to Wisconsin State Employee Health Plan for National Health Insurance Reform



e-Newsletter

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Upcoming MATI Committee Meetings

Program and Policy Committee

• 9-11 a.m. Wed., July 8
 (IMPACT, 6737 West Washington St.)

• 9-11 a.m. Wed., Aug. 12
 (Springfield College, The Commerce Building, 744 N 4th St. #300)

Riemer To Be Interviewed About Addiction Polling on WTMJ-4 Newscast, Between 4:30-5 p.m. Today

David Riemer, Community Advocates Director of Policy and Planning and Milwaukee Addiction Treatment Initiative Program Director, is scheduled to discuss national attitudes about addiction and treatment, health care reform and the treatment gap during a live interview on WTMJ-4 between **4:30-5 p.m. Thursday, June 25.**

Riemer / Enthoven *New York Times* Op-Ed: Congress Should Look to Wisconsin State Employee Health Plan for National Health Insurance Reform

The June 25 Op-Ed can be found on the [New York Times Web site](#).

Resources

[MATI Web Site](#)

[MATI Blog](#)

[Closing the Addiction Treatment Gap](#)
(Open Society Institute)

[Community Advocates Public Policy Institute](#)

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The Only Public Health Plan We Need

By David Riemer and Alain Enthoven

CONGRESS will soon decide whether to create a public health plan to compete with private insurance companies and thus lower the cost and raise the quality of care.

Everyone assumes that a public plan means a government-sponsored insurer that makes payments to doctors and hospitals, whether in the form of Medicare or -- the latest idea -- state-sponsored cooperatives. But Medicare has a dismal record of controlling costs and improving quality, and we lack evidence that co-ops could do any better.

A better public plan would not be a new government-run insurer at all, but rather a government-chartered mechanism that would let employers and individuals buy health coverage from private insurers in a manner that uses the three most essential market forces -- choice, competition and incentives -- to reduce the price and improve care.

Congress is already looking to create federal or state "exchanges" through which individuals could comparison shop for health insurance. Exchanges pool large numbers of people and give them access to various health care plans -- so that individuals can enroll in the plan of their choice, and so that risks and administrative costs can be spread widely.

An exchange is a key feature of the public plan we'd like to see, but it's only one element. Two other features are needed to give an exchange the power to pressure insurers -- whether health maintenance organizations, preferred provider organizations, or fee-for-service plans -- to hold down prices and improve care.

Read the full Op-Ed [here](#).

Eau Claire Leader-Telegram: Advocate: State should have health plan ready

The June 23 article can be found on the [Leader-Telegram Web site](#).

By Tom Giffey
Leader-Telegram staff

If federal efforts to reform the U.S. health care system fall short, Wisconsin should be ready to implement its own plan for universal coverage, a former state budget director says.

"Wisconsin needs to be prepared to lead," said David Riemer, who was budget director for Democratic Gov. Jim Doyle in 2003 and chief of staff to former Milwaukee Mayor John Norquist. "We can't just sit there staring at our shoes assuming that we're out of the picture."

Riemer, director of policy and planning for Community Advocates, which works on behalf of low-income and at-risk people in the Milwaukee area, discussed health care reform with Leader-Telegram editors Monday.

While reforming the nation's health system is a contentious topic, Riemer noted that a broad consensus is forming over what should be done.

"Most Democrats and Republicans agree that everyone should be required to have health insurance," he said. "Most people agree that there should be a pretty good benefit package, (and there is) a lot of agreement on preventive care of wellness."

Read the full article [here](#).

The Milwaukee Addiction Treatment Initiative (MATI) is a collaboration among local stakeholders -- including treatment providers, public health agencies, law enforcement, faith-based agencies, advocates and members of the recovery community -- to close the addiction treatment gap in Milwaukee County and ensure that everyone who needs treatment can receive it. MATI is sponsored by a grant from the Open Society Institute, Baltimore, with additional funding from the Helen Bader Foundation, the Zilber Family Foundation and the Greater Milwaukee Foundation. Visit MATI online at www.ca-mati.org.

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