



# The Politics of Caring

## The 109th Congress Gets Down to Business

### **Several issues pertain to nurses.**

Congress returned to work in late January and began to deal with many top-tier health care issues. In addition to handling the introduction or reintroduction of various legislative proposals, the Senate conducted hearings for the confirmation of several cabinet members.

One was the confirmation of Michael O. Leavitt, nominated by President Bush for the position of secretary of the U.S. Department of Health and Human Services. Leavitt testified before the Senate Health, Education, Labor and Pensions (HELP) Committee on January 18 and the Senate Finance Committee on January 19. Questions during these hearings focused on Medicaid and his perspectives on negotiating drug prices for Medicare beneficiaries. Leavitt is the outgoing administrator of the Environmental Protection Agency and a former governor of Utah. His nomination received considerable bipartisan support. The threat of a potential postponement of the Leavitt confirmation by Senator Byron Dorgan (D-ND) was thwarted when Senator Bill Frist (R-TN) and HELP committee chairman Michael Enzi (R-WY) promised to hold a hearing within 90 days on drug importation legislation cosponsored by Dorgan and Senator Olympia Snowe (R-ME).

As governor of Utah, Leavitt secured a controversial federal waiver that allowed Utah to reduce Medicaid benefits and impose cost sharing on the state's mandatory Medicaid population, while expanding coverage to new populations.

There is growing concern that Congress may see administrative proposals that could dramatically change the Medicaid program and possibly cap federal allotments to the states to cover "optional" populations or services such as dental care. Currently, Medicaid coverage is mandatory for extremely-low-income families with children, but states have the option to cover other groups. Advocacy groups such as Families USA and others have gone on record in urging President Bush to preserve the individual entitlement provided under Medicaid and opposing changes to the current structure. Leavitt's appointment was approved by the Senate on January 26.

### **AFFORDABLE HEALTH CARE ACT**

On January 24, 2005, Senator Edward Kennedy (D-MA), along with 15 cosponsors, introduced the Affordable Health Care Act (S. 16). The bill aims "to reduce the cost of quality health care coverage and improve the availability of health care coverage for all Americans." Senator Kennedy frames this bill as the Democrats' commitment to end the crisis in health care that affects many families. He considers it "a down payment on our commitment to quality, affordable health care for every American," citing a worsening health care crisis caused by skyrocketing costs, declining insurance coverage, and less financial security for American families. Kennedy views the legislation as a good start to dealing with this crisis.

The bill aims to guarantee that every child in America has access to quality health care coverage; to make Food and Drug Administration (FDA)–

approved drugs available in the United States at the same fair prices available in Canada and Europe; to take a giant step toward adoption of modern information technology in health care; to provide the FDA additional authority to monitor the safety of approved drugs; to address the special burdens small businesses face by offering tax credits to reduce the premiums they pay when covering employees; to establish a demonstration program in 25 cities to expand insurance coverage for small businesses; and to put Congress firmly on record against destructive cuts in Medicaid. The bill was referred to the Senate Finance Committee. For more information on this legislation, contact Kennedy's office through the U.S. Capitol Switchboard, at (202) 224-3121, or refer to <http://thomas.loc.gov>.

### **REGISTERED NURSE SAFE STAFFING ACT**

Also on January 24, 2005, Senator Daniel Inouye (D-HI) introduced the Registered Nurse Safe Staffing Act (S. 71), which would require Medicare-participating hospitals to develop and maintain reliable systems to determine sufficient RN staffing. These staffing systems would be based on input from the RNs providing direct care and a variety of other factors. This bill reflects the ANA's position on safe staffing. For more information contact Michelle Artz, associate director of the Department of Government Affairs, at [martz@ana.org](mailto:martz@ana.org). For a look at the bill, go to <http://thomas.loc.gov>. ▼