

The Shape of Things to Come?

RNs nationwide share their perspectives on health care reform at working group's meetings.

After gathering comments from RNs, other professionals, and the public, the federally appointed Citizens' Health Care Working Group recently unveiled a plan to resuscitate health care in this country.

Although the public comment period on those interim recommendations is scheduled to end August 31, there still are many opportunities for RNs to share their opinions on health care reform, according to Cynthia Haney, JD, a senior policy fellow in the ANA's Department of Nursing Practice and Policy. One avenue for further input from nurses is upcoming Congressional hearings, which will occur when the working group develops its final recommendations and report.

Over the past year, the ANA has ramped up its activities around health care reform. It released its updated document called *ANA's Health Care Agenda 2005*, which, like the working group's plan, calls for making an essential set of health benefits available to all Americans.

(It's available online at www.nursingworld.org/readroom/anhca05.pdf.)

The ANA also has worked with several coalitions that share nurses' commitment to work for equitable health care and collaborated closely with the federal working group to promote a series of community meetings held around the nation to ascertain the public's views on health care reform. The ANA encouraged nurses to attend those meetings, as well as to provide comments online to the working group. As a result of the efforts of the ANA and its constituent

member associations, many nurses answered the call.

"On a daily basis, nurses witness a health care system that grievously fails individuals, families, and communities—the very people whose health, safety, and rights nurses are obligated to promote and protect," Haney says. "Health system reform isn't optional, so it's important that nurses participate in discussions that will affect the very heart of our profession and the way we provide care."

Paula Stearns, MSN, RN, executive director of the Colorado Nurses Association, also sees the crucial role nurses can and need to play in health care reform.

"Each nurse has a story to tell, and it's important for them to articulate those stories to policymakers and the public," Stearns says. "Nurses also have the knowledge to address the complex issue of reform, and because their opinion is valued by the public, they really can make a difference in where health care goes from here."

PARTICIPATING IN THE DEBATE

Congress established the working group as part of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003. Its task was to learn what citizens thought about the current health care system, how it could be improved, and how best to finance health care coverage. To obtain that information, the group held 31 community meetings across the country, reviewed comments sent to its Internet polls, and conducted six hearings with health care and other leaders, among other activities.

Charlotte Denny, RN, a Kentucky Nurses Association

(KNA) member, attended a community meeting in Lexington, Kentucky. A longtime nurse, she has indeed witnessed the failures of the current health care system. Just recently, Denny said she observed a young woman who left a drugstore without her prescription medication after learning how much it cost.

"She told the pharmacist that she didn't have money to pay for the medication and still eat," Denny says. "We have many people in Kentucky who put off getting the care they need because they don't have insurance or money to pay for services. What often happens is that they get sicker, so their care becomes more expensive."

Denny and Sharon Eli Mercer, MSN, RN, CNAA, BC, executive director of the KNA, knew the messages they wanted to convey at the Lexington meeting. "We have many industrial jobs in our state, and many don't provide affordable health insurance to their employees or even provide a group plan," Eli Mercer says. "At the KNA, we believe that all Americans should have access to health care services, including the uninsured and the underinsured. We also believe that advanced practice registered nurses should be used to the greatest extent in all health care settings, because they provide high-quality services at lower costs."

Also a strong advocate for universal health care coverage, Denny says that lowering health care costs has to be part of the reform equation.

"One of the issues that came up at our

Susan Trossman is the senior reporter for the American Nurse, published by the ANA.

meeting was the way the public uses health care,” Denny says. “Oftentimes, people go to the ED when they don’t really have to or demand that their physicians provide certain treatments they don’t need. That drives up the costs of health care. So as nurses, we need to educate the public on how to best use health care.”

Stearns helped facilitate the discussion at the Denver meeting, where more than 300 people participated. “What became clear at our meeting was that people don’t want incremental changes in the health care system,” Stearns says. “They know the current system is not working.”

The idea that health care needs sweeping change reflects the Colorado Nurses Association’s perspective. “At our fall 2005 convention, our members endorsed a single-payer system,” Stearns says. (“Single payer” refers to one entity, such as the federal government, that’s in charge of collecting all health care fees and paying out all health care costs.)

Denver meeting participants strongly supported creating a national health insurance program that would be financed by taxpayers. According to a working group summary of those proceedings, 95% believed all Americans should be provided

with a “defined level of services over categorical coverage provided in the current system.” They also supported the notion of basic services as “universal and lifelong.”

When deciding on who should determine the make-up of those basic benefits, participants preferred that consumers and health care professionals make that determination. Participants also developed a wish list of what they want in health care, and it included factors such as timely care, “cradle-to-grave” access, simplicity, and a reliable source for health education and information.

THE WORKING GROUP PLAN AND OTHER EFFORTS

When the 15-member working group completed its information-gathering process, it created the interim recommendations, which have been posted online with more detailed information at www.citizenshealthcare.gov. The working group planned at least two community meetings focusing on these recommendations, and nurses were able to respond to them online, as well.

In summary, the interim recommendations state the following:

- Public policy should guarantee that all Americans have access to affordable health care.
- An independent, private–public group should be created to identify aspects of a “core” benefits package that will encompass care throughout the lifespan.
- Americans should be protected against extreme health care costs that could break them financially.
- The federal government should lead an initiative to develop and expand public–private community networks of health care providers to better meet the needs of vulnerable populations.
- The federal government should promote strategies aimed at improving the quality of care Americans receive, while controlling health care costs.
- The way palliative care, hospice care, and other end-of-life services are financed and provided must be restructured to guarantee Americans greater access.

Haney is not surprised that some of these recommendations reflect nurses’ concerns. “Nurses were the single most represented group at the community meetings,” Haney says. “They showed they were willing to share their day-to-day experiences on the units, explain health care termi-

nology as needed, and explain what policies look like in reality.”

Meanwhile, the ANA will continue to engage nurses in grassroots efforts to shape health care reform, promote its ANA’s *Health Care Agenda 2005*, and lobby for legislative measures that address the quality and affordability of health care. (For more information on the ANA’s related positions and activities, go to www.nursingworld.org.)

In the states, nurses associations also are continuing their initiatives. The Colorado Nurses Association’s health care reform committee worked with other community organizations to successfully push through a new state measure that creates a blue ribbon commission—consisting of consumers, health care professionals, and insurance providers—that will examine ways to reform health care in Colorado.

In the Midwest, the Minnesota Nurses Association (MNA) raised the public’s awareness of the need for health care reform by promoting a state constitutional amendment that would have made health care a “right” for all Minnesotans.

“Although the amendment did not progress, it gave nurses a place to start when they spoke with legislators and the public about the pitfalls of the current system, how it can be improved, and their real-life experiences,” says Linda Slattengren, RN, president of the MNA. “They were able to talk about the crowded EDs, the shortage of beds and staff in ICUs, and the lack of preventive care.”

The MNA also continues to hold forums and develop materials for its members to help them better understand the complex issues of health care reform and how they can play a role in health care’s transformation.

Adds Slattengren, “I think the state of Minnesota is ready for health care reform, and so is the nation.”