

Health Care Reform

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Reviewed:

Revised:

Position Statement:

The **National Federation of Nurses** holds as a principle the right of all US residents to receive an essential set of health care services. Those services should be directed toward assisting the individual to achieve or maintain the highest possible health status, intervention for illness, prevention of disease or complications from disease and achieve a dignified end of life.

The NFN strongly believes that a single payer system which offers an essential set of benefits to all US residents is the most desirable option for true reform of US healthcare. In the immediate, changes in our existing multiplicity of systems must be shaped so that they converge as much as possible on the major services described above. The current system must change, must begin to reduce costs and must assist individuals to improve their health even without major federal policy changes.

The proposals at the federal level in 2009 are primarily centered around achieving coverage for the greatest possible number of Americans. Discussions continue to focus on an insurance model which links access to coverage and funding for expansion of that coverage. While the NFN believes that health insurance is one method of supporting access to care, coverage does not correlate necessarily with access, outcomes, health status or cost control. The following provisions must be a part of any reformed system in order to address those goals.

Support for Primary/Preventive Health Care Services

The most effective method for delivering comprehensive health care services is through an established ongoing relationship between a provider, network or group of providers and the patient. The primary care home or health home in which all health care services can be delivered or arranged should be the focus of any proposal. Improved reimbursement from any and all payers should focus on services such as health appraisal, prevention support, counseling, teaching and multiple forms of provider contact (such as electronic communication).

All providers licensed to deliver health care services should be supported in performing to the full extent of their scope. Nurse Practitioners, Nurses, Clinical Nurse Specialists, physicians, mental health providers and others must be included in the health home. Registered Nurses, as the

largest group of licensed health care providers in the country, are critical to a change in focus from the high cost illness intervention model to prevention and primary care. Registered Nurses practice in all settings where care is delivered and strengthening the role offers a clear opportunity to improve care and reduce costs. Current proposals such as the proposal for “transitional care” for Medicare beneficiaries recently discharged from acute care facilities recognize the impact that RNs can achieve on both quality of care and reduced costs.

Individual Health Status

Improvement of health status and prevention of disease or its complications is a goal for every individual. The NFN, as a representative of Registered Nurses believes that all US Residents should have the right and resources to pursue this goal. That right is supported by access to services through the primary care health home.

Public Health

In order to support improvement in the health status of the population as a whole, reinvestment in public health must be a priority. Eradication or control of dangerous communicable diseases, health surveillance, insurance of a safe and clean environment and public education is as important as care provided to individuals and provides the critical linkage between various segments of the health care system.

Quality

The utilization of evidence to establish and pay for benefits and services is critical to improving quality and reducing costs. Proposals to require the use of comparative effectiveness must be a part of any plan while preserving patient/provider judgment and choice based on the best available evidence.

Financing

Until a single Health Care system can be implemented, all options for financing health care should be considered as long as they are based on ability to pay. No one category of Americans should enjoy a benefit that is not based on ability to pay. All proposals for financing health care should achieve no more than the current cost of health care from all sources and have as a primary goal cost reduction from current levels.

Public Option

The current proposal for a “public option” offers a nationwide opportunity to achieve economy of scale through participation by large numbers of individuals. It also offers increased competition to the current private health insurance market. The voluntary program must have a benefit plan robust enough to attract individuals at an affordable price. It should be implemented to test the underlying assumptions and provide evidence about how a nationwide single system could operate.

Workforce

Major health system reform will succeed only if there is a sufficient health care workforce including Registered Nurses and Advanced Practice Nurses. Currently there are insufficient numbers of both. System reform should include funding for provider education across all critical disciplines, incentives for faculty practice and improvement in funding for services provided through the health home. Those strategies will most likely result in sufficient numbers and types of providers over time.