covering a nation

Elections Were a Sign of Hope for Health Care Reform

aving scored a major political victory when they took control of the House and Senate for the first time in 12 years, Democrats are now eager for a policy victory to prove they deserve the reins of power. Major legislation to improve the health care system would be a sweet story line for the party that tried but failed 15 years ago to overhaul the system. And it wouldn't hurt the Dems's prospects for the 2008 presidential race, either.

With the political winds blowing in their favor, at least for now, the Democrats may indeed have a golden opportunity to make progress on health care reform, which has all but fallen off the domestic agenda. Following the dramatic midterm election results, some commentators were more optimistic than others:

"Health care reform is back," Kenneth Thorpe, PhD, an economist at Emory University, Atlanta, told ABC News two days after the election.

"The election will produce little change of any magnitude" on health care issues, argued Thorpe's Emory colleague Richard Saltman, PhD.

Regardless of which outlook you are more likely to subscribe to, the environment in Washington has changed. With turnout higher than usual, many voters pulled the lever not for a particular candidate but to register their displeasure with the war in Iraq and corruption in Congress. At the same time, voters clearly expressed their demand that things change. In doing so, they swept the Republicans out of the leadership suites on Capitol Hill and swept in what could either be a very productive or a very paltry two years of public policymaking.

LOOKING TOWARD 2008

So, which will it be? Most likely neither. Political analysts and health policy experts widely agree that the Democrats may be able to advance some

incremental changes in health care. You might see, for instance, passage of a bill to allow for the reimportation of prescription drugs or one enabling the federal government to negotiate discounts on Medicare drugs.

It is far less likely that, even with their newfound power, the Democrats will be able to move legislation to significantly address the nation's health care issues or help solve the chronic and unforgivable problem of the uninsured. We are likely, however, to see a renewed and, one hopes, spirited focus on health care that could lead to it becoming a top-tier issue in the 2008 campaign and beyond.

"I promise that in 2008, [health care] will be the biggest issue in the election," said former Democratic National Committee Chairman Terry McAuliffe, speaking at an event in Washington last year moderated by former Sen. John Breaux (D-LA).

McAuliffe's counterpart in the Republican Party, Ed Gillespie, largely agreed, saying that health care will be "*the* defining domestic policy debate in the 2008 presidential campaign."

Voters are eager to see that happen. The public, in other words, is ready again for a health care debate, ready to take on a system that is increasingly viewed as unjust and, if it gets no significant change, unsustainable.

Yet when asked in exit polls, few voters cited health care as a primary reason for their vote. That is because Iraq, congressional corruption, and a controversial White House were the factors that drove lots of people to make the choices they did. Still, in opinion surveys conducted at times other than just after an election, voters continually rank health care as one of the top few domestic issues requiring immediate attention.

LEGISLATORS ARE LISTENING

Regardless of how much progress there is in the



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110th Congress—and we all hope there is at least some—we now have a unique opportunity to make sure our voices are heard by a new batch of national leaders. The Catholic health ministry has spoken early and often about health care that works for everyone and the moral imperative of creating such a system. Now there are new listeners and a new environment for the words, ideas, and hopes that the ministry has articulated for years.

Legislators are listening. In fact, the new Democratic leadership is clamoring for ideas that are centrist and reasonable enough to move through Congress. This is a rare opportunity to voice ideas and be sure they are heard.

The Catholic health ministry contributed more comments to the Citizens' Health Care Working Group than any other group or constituency, and the Working Group's final recommendations to Congress and the president reflected the ministry's priorities for a reformed health care system, especially that it include everyone.

Approximately 1 in 20 of the comments received by the Working Group came from Catholic health care providers. Imagine if we multiplied that by 10 or 20. Imagine if Congress received 500,000, or even 1 million, letters from people who work in Catholic health care. There is power in numbers, and we have the numbers to make sure our voice is a prominent one in the coming debate.

We will not have health care for everyone tomorrow, or in the 110th Congress. And it may take much longer still. But there is reason for hope, reason to believe that progress is possible if we continue the twin objectives of engaging the public and motivating its leaders. Forty-six million people are waiting for health care, nine million of them children. The Catholic health ministry can help make sure they don't wait a minute longer than they have to.

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