

Our Vision for U.S. Health Care: We Can Get There from Here



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As the 2008 election season unfolds, the American public is perhaps more interested than ever in health care reform. In addition to CHA-sponsored opinion research, many independent surveys place health care in the top tier of issues the public perceives as requiring urgent attention, alongside others including Iraq and the economy.

Some might say, "I've heard it before that health care is a top issue, and yet nothing ever seems to get done." That would be correct. Voters consistently tell pollsters and others that our nation's health care system requires urgent and careful reform. Yet, so little has been done when it comes to comprehensive change and making certain no one goes without basic medical services.

In fact, since health care reform was last attempted on a grand scale in 1993-94 by the Clinton Administration, the situation has only worsened. Instead of 37 million uninsured people, we now have 47 million. Costs have grown at a rate unmatched elsewhere in the economy (think double-digit spikes in health insurance premiums). On the quality front, we continue to face unforgivable disparities in how minorities are treated, and medical errors are still far more prevalent than they should be.

So, why should we believe this moment is unique, that there is a real chance this time to make real change? The answer may be found in the triumvirate of momentum, coalitions and dialogue. Two states, Massachusetts and California, have enacted significant health care plans in recent years and months. Many other states are on a similar path. These efforts are starting to bear fruit because they have involved bringing together all affected

parties that have worked together toward a viable compromise.

The presidential race is also in the mix with several candidates developing and pushing proposals to expand coverage and access, reduce costs and spending, improve quality and eliminate waste and abuse. Aside from Iraq, health care is one of the most mentioned topics on the campaign trail.

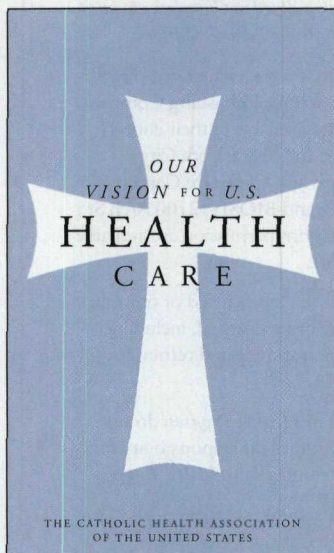
With these developments making headlines around the country, a new kind of momentum is building, one that says this *is* possible. Yes, problems exist with each state's rendition of health care reform, and it is true that many elements of these plans will have to be revisited, retooled or

revoked. To focus on the problems, however, misses the point, which is that collaborative efforts to make progress, with everyone at the table, are working — and can work for our entire nation.

The alternative model of the federal government enacting a top-down legislative solution has proven to be far less effective than the more recent developments in the states.

To take advantage of the momentum, and build on the recent successes created by consensus and dialogue, we need to take several additional steps. One of those steps is embodied in the document bundled with this issue of *Health Progress*: "Our Vision for

U.S. Health Care." The *Vision*, literally a collaborative effort of the Catholic health ministry, is based on Catholic social teaching and describes the values at stake in this debate. It then proceeds to list six principles, or reform elements, that must be met in order for health reform to be successful from the perspective of the Catholic health ministry.



At CHA, we hope this document will fuel new conversations around the country and inspire lawmakers to think about health care as a moral issue instead of an economic and political one. Also, we hope this document can be the springboard for tangible action on health care reform — action that can help create a system in which everyone is served with dignity and compassion.

As we present the *Vision* document to lawmakers and use it in community conversations, we must also be aware of other obstacles to our success, many of which can be solved through dialogue. For instance, a recent opinion survey conducted by the Kaiser Family Foundation indicated that Republicans and Democrats widely agree on the need for health care reform but then split when it comes to the specific problems that need attention.

Forty-seven percent of Republicans surveyed said they would rather hear presidential candidates discussing health care costs than expanding coverage for the uninsured. For Democrats, the answer goes in reverse, with 42 percent saying they would rather hear about increasing coverage. At the end of the day, both issues need to be addressed. The interrelatedness between cost and access has never been disputed and requires careful, non-partisan analysis.

The *Vision* document reflects the fact that health care reform is much more than any of these single elements and in fact must involve addressing all of them together. We hope this resource and related materials on the CHA's website will help readers in their daily work and efforts to advocate on behalf of a health care system that works for everyone.

The next time someone asks why this truly is the time for health care reform, tell them that we have the voice to raise in making sure momentum creates change and not frustration. ■



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