

THE WAIT IS OVER

Along with our readers, we waited — and we waited. From the U.S. Supreme Court's decision last November to hear challenges to the Patient Protection and Affordable Care Act, to the oral arguments in March, to the historic day of the ruling itself, CHA staff and members were on the edge. What would the court decide? Would the decision ever come? Even those who expected the court to delay its announcement until the session's end could hardly stand the suspense. And then — drumroll, please: on June 28, 2012, the Affordable Care Act was upheld.



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For all who supported the law, reason and compassion carried the day. For many of the nation's 41 million uninsured, a fundamental right to health care would be theirs. Health care leaders who had moved forward in anticipation of fixing a broken health system were vindicated. *Health Progress* could go to press.

We had decided months ago that our summer issue would reflect some of the concerns and challenges facing leaders. Unprecedented challenges, because — whether or not the court upheld the law — the reform of the U.S. health system is underway. The fee-for-service model that has driven costs relentlessly upward is giving way to a system focused on quality, prevention and greater access. And nobody — including the authors who wrote for this issue — suggests it will be easy to turn the big ship around. In the words of Ascension's Katherine Arbuckle, "Today, those who serve in the health care ministry in the United States face unprecedented levels of uncertainty."

We planned this issue to be content-rich and provocative, to reflect some of the concerns of Catholic health care leaders and to give them material to think, talk, and possibly argue about. While there is much to rejoice over as the Affordable Care Act (ACA) goes into effect, there are major steps ahead: reaching the ultimate goal of access for all who make America their home, as well as implementation of the law. Risk is inherent in any major change, and where implementation is concerned, there is room for — and a need

for — a variety of opinions on the best way forward. As SSM's Bill Thompson points out in his overview of things worrying leaders, the focus of health care must change from hospital-centric to people-centric. As CHI's Michael Rowan points out in his article on leadership, those at the helm in this new environment, from board members to executives, will be ineffective, perhaps even obstructive, without the right vision and a different set of skills. As Dan Clayton, Julie Ward and Michael Taormina of CHAN point out, audit committees are taking on new responsibilities. And as John Finan of FMOL Health System wonders, will health leaders be able to improve management of care at a faster rate than growing resource restraints?

There is a great need for creative leadership, innovation and discernment. There are opportunities for those who seize them. And there is both reason and need for hope. Can our worries become sacraments? Terry Weinburger, mission executive at SCL Health System, assures us that they can.

I also call your attention to two articles related less directly to implementation of the ACA, but related in important, even vital, ways to the Catholic health care ministry itself. One is a reflection by Sr. Doris Gottemoeller, RSM, on whether Catholic identity and for-profit health care can coexist. The other is an overview by Fr. Fred Kammer, SJ, of the concept of the common good, its roots in Catholic thinking and its application to health care reform. Both are texts of talks presented in different venues, and both stand to reward the investment of reading time for anyone interested in the evolution of Catholic thought.

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