Learning About Health Care Policy: Part 1

Kevin Kawamoto

University of Washington

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Learning About Health Care Policy: Part 1

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By Kevin Kawamoto <kawamoto@u.washington.edu>

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.01 What is Health Care Policy? (return to index)

Among the many different topics that can be discussed under rubric of health informatics [1] is health care policy, a multi-faceted field that has enjoyed a growing presence on the Web. Before defining health care policy, however, an attempt will be made to define public policy in general. Public policy – and more specifically, American public policy – refers to the rule-making and strategic planning actions of government (federal, state, and local), actions that affect a relatively large number of people and provide public guidance and/or protection by devising solutions to significant social problems. Public policy can also preempt social problems insofar as those problems can be anticipated and where there is sufficient motivation among policymakers to take preemptive action.

Health care policy, as defined for the purposes of this article, is the rule-making and strategic planning actions of government in regard to health care issues. Health care policies may take the form of laws, rules and regulations, guidelines, recommendations, mandates, and strategic plans relating to the health status of a defined group of people (e.g., children, older adults, specific ethnic minority groups, the poor and so forth) or of the population as a whole. Lawmakers and
their staff, government administrators and their staff, policy analysts, health experts, non-profit organizations, industry representatives, the general public and many others can impact the policy-making process. The underlying goal of health care policy should be to elevate the public’s health status.

The range of health care policies is wide – concerning everything from the provision of Medicare and Medicaid to quality control of prescription drugs and food additives to the licensing of health care providers and so on. Health care policy also involves public outreach – e.g., educating special target populations about epidemics, disease and injury prevention, findings from research studies and other important public health issues. Sometimes these informational campaigns occur at the national level; other times at the state and local level. Sometimes federal and state and/or local agencies work collaboratively. During the flu vaccine shortage in Autumn 2004, for example, the Centers for Disease Control and local public health agencies advised the public about vaccination protocol and instructed health care providers to comply with priority-based vaccine administration guidelines.

On a national level, health care reform has been one of the most hotly debated topics in the past decade. During the 2004 presidential election year, presidential candidates enumerated problems with the current health care system in public speeches and on their official Web sites. Solutions for improving the system were also proposed. These proposals provided insights into different solutions for increasing health insurance coverage for the uninsured and dealing with rising drug and health care costs and came at a time when 45 million Americans were uninsured and health insurance premiums through the workplace were skyrocketing. According to a Kaiser Family Foundation and Health Research and Educational Trust report (2003), “Premium increases for health care insurance through the workplace totaled 13.9% for the 12 months ending in spring 2003, the third straight year of double-digit increases. The increase was the biggest for a single year since 1990.” Premium increases were outpacing both inflation and earnings. The public, news media, politicians and others were paying more attention to the “problem of health care,” an ironic concept considering that the goal of health care should be to alleviate problems. The system itself, it seemed, was ill.

.02 A Historical Overview: Health Care Reform (return to index)

Articles and books about comprehensive health care reform usually refer to the 1993 attempt by former President Bill Clinton to use the power of the federal government to vastly extend the reach of health insurance coverage in the United States and revolutionize the health insurance system. Then-First Lady Hillary Rodham Clinton was put in charge of collecting information and making recommendations for Congress to consider. In his book, Health Care Policy in the United States, Larry E. Carter writes, “Ms. Clinton responded by assembling a huge task force with representatives from all sectors of the health care industry. Doctors, other health care providers, pharmacists, child advocate representatives, hospital administrators, insurance companies – seemingly every group with an interest in health care reform was invited to participate either on the panel or to testify at one of many scheduled hearings” (p. 3).
The focus on health care reform, however, did not begin in the 1990s. Health care as a campaign issue was a constant presence in the previous century. “As far back as the presidential election campaign of 1912, in the flowering of the Progressive era” writes Haynes Johnson and David S. Broder in The System (1996), “both Theodore Roosevelt and Woodrow Wilson pledged to improve the nation’s health. In his inaugural address that next March, Wilson promised to attend to ‘safeguarding the health of the nation, the health of its men and women and its children. This is no sentimental duty … These are matters of justice’” (p. 64).

The debate over universal health care coverage for Americans dates back to at least the 1930s, when President Franklin D. Roosevelt was hammering out his New Deal programs to build a “Great Society” in the wake of the Great Depression. Roosevelt succeeded in creating a federal Social Security system and unemployment insurance, but failed to include universal health care as part of the package. “The Committee on Economic Security,” wrote Milton Fisk in Toward a Healthy Society: The Morality and Politics of American Health Care Reform (2000), “… left out a health insurance program designed to be run by the states on the grounds that its inclusion would spell defeat for the whole bill” (p. 69). In the decades to follow, various administrations would attempt to create something akin to a national health care system, only to be opposed by powerful special interests. In the 1960s, Medicare and Medicaid provided insurance coverage for certain classes of people – namely the elderly, poor and some other groups – but universal coverage for all Americans as envisioned by presidents from Franklin D. Roosevelt in the mid-1930s to Bill Clinton in the early 1990s has yet to be realized.

Health care continues to be a major campaign issue and topic of public concern, especially as health care costs rise and more people are unable to afford or qualify for private health insurance. Whether and how health care reform will take place in the years ahead depends, in large part, on the ideological underpinnings of policymakers and the competing influence of social forces surrounding them.

.03 Major Players, Major Issues in Health Care Policy (return to index)

The list of major players in the health care policy universe is extensive. Federal, state and most local governments have health-related agencies, departments, programs, commissions and advisory boards with particular responsibilities and missions. Their roles may include advisory, educational, policymaking, regulatory, enforcement, oversight and research activities. Throughout past decades, the federal/state balance for health care policy and planning has shifted back and forth depending on the reigning policy philosophy of the era. In absence of universal health insurance coverage nationally, some states – such as Hawaii and Oregon – have been proactive and implemented programs at the state level that promoted widespread access to health insurance.

All branches of government – executive, legislative and judiciary – can impact, if not initiate, health care policy in some way. Citizens and advocacy groups, special interest groups, political action committees, the health care industry, pharmaceutical firms, insurance providers, medical
associations, lobbyists, educational and research institutions and so forth also play important roles in health care policy formation. Groups such as the AARP and American Medical Association, for example, represent large numbers of influence-wielding constituents.

Learning about how government involves itself in health care has become much easier with the advent of the Internet. Government Web sites typically have a “Health” link on them for people who want to explore the health-related services and activities mentioned there or for those who need very specific products such as a downloadable application of some kind or information about community clinic hours and services. At the federal level, the Department of Health and Human Services, the Centers for Disease Control, the Food and Drug Administration and the Institutes for Mental Health are just some of the major health-related entities. Other, usually smaller, entities exist at the state and local level. In Washington State, for example, there is a state-level Department of Health, as well as a city-county level Public Health Department (i.e., Seattle-King County Public Health). If a health care problem or issue is large enough (e.g., AIDS awareness and prevention, flu vaccination shortage, etc.), several levels of government take part in addressing it and finding practical solutions. Numerous health care policy “think tanks” at various academic institutions and elsewhere have a presence on the Web. The next section provides a cross-section of these.

.04 Selected Health Care Policy Web Sites

Most citations from Yahoo!’s Health Care Policy Directory,
source: http://dir.yahoo.com/Health/Health_Care/Policy/

www.ahrq.gov
Agency for Healthcare Research and Quality (AHRQ) – U.S. Department of Health and Human Services offers health care information, research findings, and data to help consumers, health providers, health insurers, researchers, and policymakers make informed decisions about health care issues.

www.allhealth.org
Alliance For Health Reform - nonpartisan nonprofit group working to ensure that all people in the United States have health coverage at a reasonable cost.

http://www.ac.org/

Alpha Center - national health policy resource center offering research, training, consulting, and facilitation, with expertise in health reform, finance, Medicare, Medicaid, managed care, and insurance markets.

www.afcm.org
Americans for Free Choice in Medicine (AFCM) - nonprofit, non-partisan educational organization based upon three fundamental principles: individual rights, personal responsibility,
and free enterprise in the health care industry.

www.medicalinsforyou.com
**Americans for National Health Care** - nonprofit organization created to design and implement a health care plan that will cover all Americans.

www.his.com/~robertb/hlthplan.htm
**Approach to National Health Care: Lifetime Voucher, Single Payer, and Mandatory Medical Savings Accounts** - discusses a novel approach to national health care combining federal, fixed, lifetime vouchers, mandatory MSAs, and a safety net.

http://chpps.berkeley.edu/
**Center for Health and Public Policy Studies** - University of California, Berkeley School of Public Health – provides data and organizes convenings that support public policies to develop an affordable, high-quality health care system.

www.hcp.med.harvard.edu/
**Department of Health Care Policy** - Harvard Medical School – serves the nation as a source for scientific knowledge about the health care system.

**Columbia University Social Work Library** – provides resources for research health policy legislation.

http://clinpol.mc.duke.edu
**Duke Center for Clinical Health Policy Research** - addresses the entire spectrum of clinical health policy from formation using evidence-based approaches to strategies for optimal policy implementation.

www.observatory.dk/
**European Observatory on Health Care Systems** - supports health policy making and the analysis of health care systems in Europe.

www.ncsl.org/programs/health/forum/
**Forum for State Health Policy Leadership** - National Conference of State Legislatures

www.forumsinstitute.org/
**Forums Institute for Public Policy** - nonprofit, nonpartisan organization committed to promoting sound public policy through education, communication, and research activities.

www.pbs.org/wgbh/pages/frontline/shows/doctor/
**Frontline: Dr. Solomon’s Dilemma** - studies the battle to achieve a quality, economically viable health care system, and profiles the financial pressures on medical practitioners when
doctors' wages are based on controlling costs.

www.uwex.edu/ces/flp/health/

Health Policy Information - from the University of Wisconsin Cooperative Extension.

http://www.hc-sc.gc.ca/index_e.html

Health System and Policy Division - Health Canada – presents national health expenditures in Canada.

www.health-care-reform.net

Health-Care Reform - offers a plan to reform the health-care system by restructuring medical education.

www.pbs.org/healthcarecrisis

Healthcare Crisis: Who’s At Risk? - companion site to the PBS program examining healthcare issues in America, including insurance, managed care, and Medicare.

www.hipaacode.com

HIPAACode.com - offers information and resources about healthcare terminology systems and standards.

http://www2.umdnj.edu/ishppweb/homepage.htm

Information for State Health Policy Program - University of Medicine & Dentistry of New Jersey – serves as a model for state health agencies in the use of electronic communication to disseminate health information.

www.kaisernetwork.org/specialcoverage/9_11.cfm

Kaiser Network: September 11 Aftermath - special coverage of the issues and debates shaping health policy since the September 11th terrorist attacks. Includes analysis of the threat of bioterrorism.

www.kaisernetwork.org

Kaisernetwork.org - offers a variety of news and information on health policy issues, including Medicare, Medicaid, children’s health, reproductive health, HIV/AIDS, health care advertising, minority health, and health reform.

www.mchpolicy.org

Maternal and Child Health Policy Research Center - conducts research and analysis on health insurance, managed care, and other financing and delivery issues affecting children.

www.milbank.org

Milbank Memorial Fund - endowed national foundation that supports nonpartisan analysis, study, and research on significant issues in health policy.
The intricacies of health care policy in the United States can be complex and daunting, but the
Web provides an excellent starting point to begin exploring this important and often fascinating field. The best way to start is to simply “get a feel” for the range and variety of health care policy – how and why it originates, develops, is adopted and is implemented. What are the obstacles? What role do the news media play? What is the process and what are the problems with implementation?

The next issue will address some of these questions.

Notes

[1] See other articles related to health informatics in previous issues:

“Health Information Online Abundant and Varied”

“Teaching Students About Cyberhealth Information”
http://bcis.pacificu.edu/journal/2003/01/kawamoto.php

“Older Adults and the Internet”
http://bcis.pacificu.edu/journal/2003/02/kawamoto.php

“Computer Technology in Health Care Settings”
http://bcis.pacificu.edu/journal/2003/04/kawamoto.php

“Privacy and Personal Health Information”
http://bcis.pacificu.edu/journal/2003/06/kawamoto.php

“Healthy Learning Can Be Fun: Digital Media and Health Education”
http://bcis.pacificu.edu/journal/2003/07/kawamoto.php

“Compassion Knows No Border: The Research of Patricia Radin”

“Health Related Blogs”
http://bcis.pacificu.edu/journal/2004/01/kawamoto.php

“Health information and Numerical Data”
http://bcis.pacificu.edu/journal/2004/03/kawamoto.php

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**ONE THOUGHT ON “LEARNING ABOUT HEALTH CARE POLICY: PART 1”**

Lin

on **November 20, 2013 at 2:31 PM** said:

There’s definately a great deal to learn about this issue.
I really like all of the points you have made.