CONNECTICUT NURSES' ASSOCIATION
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TESTIMONY RE: PROPOSED BILL No. 6332 AN ACT INCREASINING ACCESS TO HEALTH CARE

Public Health Committee Hearing
January 31, 2007

TO: Senator Handley, Representative Sayers and members of the Public Health Committee.

FROM: Mary Jane Williams, past-president of the Connecticut Nurses' Association and current chairperson of its Government Relations Committee.

Thank-you for the opportunity to provide testimony on behalf of the Connecticut Nurses' Association (CNA), the professional organization for registered nurses in Connecticut. I have practiced nursing for over 40 years and have been educating nurses in Connecticut for 35 years. Currently I am chair and professor of Nursing at the University of Hartford. We are providing testimony on P.B. No. 6332, AN ACT INCREASING ACCESS TO HEALTH CARE.

We have the data. We know that thousands of Connecticut's residents lack health care coverage. Most of these individuals are employed. Most cannot afford health care premiums and cannot qualify for public programs. Most also wait to seek care and when they do, they are sicker and cost more to treat. The uninsured are a piece of the overwhelming problems of the health care system that require attention on the part of health professionals, policy makers and the public.

Our association supports the development of a plan that ensures that each resident of the state has access to affordable, quality health care. A plan that would be built on the Institute of Medicine recommendations that expansion of health care coverage be based on 5 principles: ***coverage for all, continuous, affordable to individuals and families,***

affordable and sustainable for society, and should enhance health through access to high-quality care that is effective, efficient, safe, timely, patient-centered and equitable.

We further support the integration of the blueprint for fundamental reform of our health care system that is outlined in the American Nurses Association's Health Care Reform 2005, an update of 1991's Nursing's Agenda for Health Care Reform which includes essential elements. The "essential elements" are found on an attached sheet to this testimony.

Nurses represent the largest group of health care providers. They practice in all health care settings, as consultants to business and industry, as primary providers of health care services, as educators and researchers, as legislators and regulators, and as the constant in disease care and prevention. Whatever group is charged with the responsibility of developing a plan to ensure that each resident of the state has access to affordable, quality health care must include nurses as part of a diverse group representing all stakeholders.

Thank you for your consideration of our recommendations. We are available for information and consultation about this important issue and look forward to being a part of the planning that will be done to implement this bill.

ANA's Health Care Agenda 2005 - an update of Nursing's Agenda for Health Care Reform (ANA, 1991)

As the debate is generated about how and what Connecticut needs to maintain the health of its residents and to grow, be competitive in our changing economy and be fiscally responsible, we can turn to the document, ANA's Health Care Agenda 2005 which was a blueprint for reform that was endorsed by over 60 nursing and other health organizations.

These essentials would help to reshape and redirect our resources away from overuse of expensive, technology-driven, acute, hospital-based services in our current model, to one where we balance high-tech treatment and community-based and preventive services, with emphasis on the latter. The solution is to invert the pyramid and focus more on primary care, thus ultimately requiring less costly secondary and tertiary care that is based on outcomes research. This will ultimately save money.

Essential Elements of
Nursing's Agenda for Health Care Reform

A restructured health care system which:

- Enhances consumer access to services by delivering primary health care in community-based settings.
- Fosters consumer responsibility for personal health, self care and informed decision making in selecting health care services.
- Facilitates utilization of the most cost-effective providers and therapeutic options in the most appropriate settings.

A federally-defined *(or state defined)* standard package of essential health care services available to all citizens and residents of the United States, provided and financed through an integration of public and private plans and sources:

- A public plan, based on federal guidelines and eligibility requirements, which will provide coverage for the poor and create the opportunity for small businesses and individuals, particularly those at risk because of preexisting conditions and those potentially medically indigent, to buy into the plan.
- A private plan would offer, at a minimum, the nationally standardized package of essential services. This standard package could be enriched as a benefit of employment, or individuals could purchase additional services if they so chose. If employers do not offer private coverage, they must pay into the public plan for their employees.

A phase-in of essential services, in order to be fiscally responsible: