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Thank you very much for celebrating this milestone with me. I would like to share one of my favorite papers I wrote for my Master's program.

Here's to your Health!

Sincerely,



The Robert Wood Johnson Foundation (RWJF) developed *The Road to Reform*, which discusses the steps needed to create a more comprehensive health promotion program. The president of The Robert Wood Johnson Foundation, Dr. Risa Lavizzo-Mourey, presents the six-steps for reform, which are supported by evidence, clear-cut and principled (Lavizzo-Mourey, R., 2009). The six-steps take into consideration our government's desire to provide a better health care system for the public, with an emphasis on health promotion. In the United State's current economic status many congressional members oppose healthcare reform however by lowering administrative costs and creating more preventative care programs, it will result in less money spent on chronic diseases, which is the greatest burden on the healthcare system (Smith, A., 2009). For example, in 2007 the estimated annual cost of direct and indirect care for diabetes was \$174 billion dollars (ADA, 2009). In 2009, cardiovascular disease and stroke is estimated to have a whopping bill of \$475.3 billion (AHA, 2009). To add, even before the recession, 46 million Americans were without health care coverage and in the current recession, it is estimated 14,000 people lose coverage everyday (Smith, A., 2009). This is not including all those who are underinsured and fear bankruptcy in order to have health care. Consequently, Dr. Risa Lavizzo-Mourey presents the RWJF Blueprint for Change suggesting: Covering the uninsured; Improving the quality, value and equality of health care; Bringing down spending; Preventing disease and promoting healthier lifestyles; Strengthen public health's capacity to protect our health; Lastly, address the social determinant of health (Lavizzo-Mourey, R., 2009).

Covering the Uninsured: The consequences of not covering the uninsured will be extreme (Lavizzo-Mourey, R., 2009). "The Kaiser Commission on Medicaid and the Uninsured reports for every 1 percent increase in unemployment, another 1.1 million people join the ranks of the uninsured (Lavizzo-Mourey, R., 2009)." The health of the public is important for a productive workforce. There are racial and ethnic disparities in health care yet the greater part of our labor force are minorities (Lavizzo-Mourey, R., 2009). Another concern are the 8.1 million children that do not have health insurance (Lavizzo-Mourey, R., 2009). Unhealthy children grow into unhealthy adults. Economic recovery is unattainable if millions of Americans are ill.

Improve the quality, value and equality of health care: Currently, Americans pay more for health care, yet are in poorer health (Lavizzo-Mourey, R., 2009). There are disparities of race, ethnicity, residence, education and income (Lavizzo-Mourey, R., 2009). It is of no value that the low-income population has health care coverage if the coverage lacks quality, reliability, and safety (Lavizzo-Mourey, R., 2009). For example, Native American men that live near the reservation in South Dakota have a life expectancy of 58 years. Those who live elsewhere live well into their 70's (Lavizzo-Mourey, R., 2009). Young and middle-aged Black men that live in dangerous neighborhoods have the same amount of risk as countries that are war-torn in sub-Saharan Africa (Lavizzo-Mourey, R., 2009). Mortality rates do differ when there are disparities.

Bring down spending: There needs to be a shift in philosophy. Currently, health care looks at the costs of everything as opposed to what can be spent. Once a budget is set, the next focus is on how to make health care more affordable (Lavizzo-Mourey, R., 2009). In the current economy this may not seem realistic however by taking the focus off of treatment and putting more focus on long-term care, people will live healthier lives and use less health care dollars i.e. emergency room visits, medications, and doctor's visits, and surgeries (Lavizzo-Mourey, R., 2009). It is estimate nearly \$800 billion a year is spent on inflated services regardless of results (Lavizzo-Mourey, R., 2009). To add approximately 95-cents of every health care dollar is spent

on “acute-care” for people who are already sick yet only 2-cents of each health care dollar is spent on disease prevention and keeping the public healthy (Lavizzo-Mourey, R., 2009).

Prevent disease and promote healthier lifestyles: National prevention programs have reaped great results. Two to mention are, national smoking cessation programs and the tobacco tax and seatbelt laws (Lavizzo-Mourey, R., 2009). A healthier community creates a healthier workforce. Approximately 95-cents of each health care dollar is spent on “acute-care” for people who are already sick yet only 2-cents of that dollar is spent on disease prevention and keeping the public healthy (Lavizzo-Mourey, R., 2009).

Strengthen public health’s capacity to protect our health: For years, public health has suffered due to political neglect, as prevention is overlooked and mental health is discounted (Lavizzo-Mourey, R., 2009). Economical wealth and health care work hand in hand. When the public is healthy they are participating in the workforce however without good health they are taxing the system by using disability benefits or workman’s compensation, and direct and indirect health care costs (Lavizzo-Mourey, R., 2009). By having so many unhealthy Americans, the healthy Americans are physically taxed, as they are the ones doing all the work. This in return causes harm to the healthy. It is a vicious cycle.

Address the social deterrents of health: Social deterrents cause negative health outcomes. Unsafe housing, air pollution, unsafe neighborhoods, and limited access to health care are day-to-day realities for minorities (Lavizzo-Mourey, R., 2009). Providing good care for all Americans is necessary for productivity, economic and social well-being (Lavizzo-Mourey, R., 2009). Treating the health of individuals is less effective than treating the health of the entire population or communities (Lavizzo-Mourey, R., 2009).

In the state of California, on January 28, 2008 the state Senate Health Committee rejected Governor Schwarzenegger and Assembly Speaker Nunez’s health reform efforts (Kaiser Commission on Medicaid and the Uninsured, 2008). Some of the reforms they proposed were:

- 1) Companies with 10 or more employees to provide coverage or contribute to the cost of health care for the employee;
- 2) Create a statewide purchasing pool;
- 3) Insurance market reform that would guarantee issue and renewability;
- 4) Subsidized premiums for individuals with 250 percent below federal poverty level;
- 5) Expand public programs.

The mentioned reforms were to be funded by employer contributions, state and federal funds, a new hospital fee, and a higher tobacco tax (Kaiser Commission on Medicaid and the Uninsured, 2008). Unfortunately, a comprehensive health care reform was not approved however two bills were passed:

- 1) Protect patient privacy and create an office that monitors this act.
- 2) Mandate that when insurers cancel a policy, the insurer allows other family members to keep their coverage (Kaiser Commission on Medicaid and the Uninsured, 2008).

The governor also increased premiums for Healthy Families (SCHIP), required children on Medi-Cal to verify eligibility every six-months, and retains the 10% cut on Medi-Cal provider payments (Kaiser Commission on Medicaid and the Uninsured, 2008).

Health care reform should be the top priority for our government. There needs to be a change in priority from short-term, band-aid, drug treatment to long-term, education, equality, and health promotion. At the beginning, there will be bumps in the road, much like anything that is new, however in the long-run, we will have a nation that is in better health and independent. The focus should change from dependency on hospitalization, medication, and treatment to greater preventative care. As a Californian, I agree with many of Governor Schwarzenegger and Assembly Speaker Nunez's health reform efforts, however I am not convinced that they are placing enough effort in health promotion and disease prevention. Also as a state, we are administration heavy and reform should begin at the top. The health of our community depends on health reform!

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