Advocacy: Contact Sport

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**LEARNING OBJECTIVES**

<table>
<thead>
<tr>
<th>Describe the process of healthcare policy development in the United States</th>
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<td>Describe the impact of nurse involvement in the health reform initiatives during the Clinton, Bush and Obama Administrations helped shape healthcare policy</td>
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<td>Identify and describe new opportunities for nurse engagement in the policy development process at the local, regional and national levels</td>
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Faculty Disclosure

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• No known or potentially perceived conflicts of interest
• No known sponsorship or commercial support has been received regarding the information to be presented
Agenda

• Healthcare Policy Development
  • Major drivers
  • Political environment
• Workforce/Payment/Delivery Models
• Finding Voice
Policy Development: Branches of Government

• Executive
• Legislative
• Judicial
President Lobbyist & Legislator

- Executive Office of the President
  - Office of Legislative Affairs
  - Office of Public Liaison
  - Office of Management & Budget
- Executive Branch
  - Regulations, Guidances and policies
  - FACA, Task Forces and Advisory Boards
- Presidential Veto
- Executive Orders
- Press Conferences/Interviews
- Speeches
- Special Events
Congressional Process: Political OK Corral
Institutional Politics

- House v. Senate
- House v. President
- Senate v. President
- House & Senate v. President
Policy Development: Congress

- House & Senate
  - Party Control
    - Leadership
    - Committee jurisdiction
- Legislation
  - Hearings
  - Advisors to Congress
    Medicare Policy Advisory Commission (MedPAC)
    Governmental Accounting Office (GAO)
    Committee Task Forces
    Lobbyists including: states & districts, American Nurses Association, American Association of Colleges of Nursing, Nurse Practitioners, specialty Nursing, American Organization of Nurse Executives, American Medical Association, American Hospital Association, etc.
Policy Development: Litigation

• Judicial challenges
  • Congress challenges power to use Executive Orders
  • SCOTUS determines ACA is constitutional
  • Court finds Dentists’ action in NC anti-competitive
• Challenges to regulations/sub-regulatory guidances that fail to follow the Administrative Procedures Act
• Enforcement Actions
The New Normal is Change

- **Paradigm shift from payor to prudent purchaser**
  - Hospital quality reporting
  - Value based purchasing
  - Hospital acquired conditions
  - Readmissions
  - PQRS

- **Innovations in health delivery and payment**
  - Medical home
  - Bundled payments
  - Accountable Care Organizations
  - Value based purchasing

- **Care models (some demonstration projects) engage providers & patients in new ways**
  - Care teams include a variety of non-physician professionals and community resources
  - Nurses practicing independently
  - Bundling services across sites
  - Data, information technology and analytics

- **Payments & transparency**
  - Price pressures increase
    - Measure cost across the entire treatment regime
    - Site of service may become irrelevant
    - Financial interdependence
  - Risk sharing /risk management arrangements
  - Quality/outcome measures
Policy Development: Advocacy in Practice

- Clinton: Health Security Act ("HSA")
- Bush: Medicare & Medicaid Prescription Drug & Modernization Act ("MMA")
- Obama: Medicare & Medicaid Patient Protection and Affordable ("ACA")
Policy Development: Nursing Engagement

- Served on Task Forces, MedPAC, White Papers on access, cost quality & safety, congressional witnesses
- Role of nursing in expanding access to healthcare services
- VA policy to enable nurse practitioners to provide serve veterans
- Promoting funding for graduate education and practice expansion
- HIPPA includes incentive payments for services of Nurse Practitioners
- ACA focus on workforce funding; emphasis on patient safety tied to payment; Accountable Care Organizations that offer opportunities for more nurse autonomy
THANK YOU

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