



# Building Blocks to a Healthier Nation

## **The Aspen Health Stewardship Project Questionnaire Senator Hillary Rodham Clinton**

### **The Aspen Health Stewardship Project Questionnaire**

The Aspen Health Stewardship Project (AHSP) was established by The Aspen Institute in the fall of 2007, and as part of its charge, has created this questionnaire, which is intended for candidates to clearly explain their perspective on the American health care system, how they characterize its weaknesses, how they intend to reshape the system and how they plan to sustain their program.

Led by a diverse cross-section of national thought leaders, AHSP's work is an innovative, non-partisan effort to frame a more multi-dimensional health care dialogue by focusing on the long-term, fundamental issues that will need to be addressed in order to fix America's broken health care system. This effort seeks to educate voters about what it will take to achieve true reform. And, ultimately, it calls on the presidential candidates and policy makers to develop plans that will meaningfully address the barriers that are preventing the nation from successfully dealing with health care – our most pressing domestic problem.

A major premise of this project is that surmounting the many barriers will require changing a culture in health care that is designed to protect and perpetuate the status quo. The current system makes it difficult, if not impossible, for Americans to be thoughtful, active and responsible stewards of their overall health. Cultural change also will require a shift in the focus of the public dialogue. Only by reframing the health care debate from one focused on the symptoms of the country's broken system to one focused on causes, can the country have a more substantive discourse about the stewardship role each of us play in creating a healthier America.

To help us evaluate your proposals and their feasibility, please answer each question in as much detail as possible and return the completed questionnaire by March 15 to Michelle McMurry, project director, at [michelle.mcmurry@aspeninstitute.org](mailto:michelle.mcmurry@aspeninstitute.org). All responses and our findings will be published and otherwise shared in a public forum. If you choose not to answer, we will use public statements and campaign documents to infer your position. If you have any questions, please contact Michelle McMurry (202/550-8830) or Noah Bartolucci (202/736-2535) at the Aspen Institute.

Thank you for participating in this important process.

## Question #1

The United States spends more than any other nation on health care, both per capita and as a percentage of gross domestic product. Even so, in a recent study of 18 leading industrialized nations, the United States finished dead last for the number of deaths that could have been prevented through effective health care. **What three fundamental aspects of the country's health care financing and delivery model would you seek to change to create a more sustainable, just, and effective system?**

My American Health Choices Plan would ensure quality, affordable coverage for all Americans. It would lower costs, improve quality, and guarantee insurance for everyone through reforms that build on what works and repair what is broken. Specifically, my plan would:

- **Lower Cost:** I will work to cut costs in our health care system and to make health care coverage affordable to all Americans. Today, premium increases consistently triple wage growth and medical bills contribute to 50 percent of all personal bankruptcies. I have proposed a seven-point plan to reduce costs that includes emphasizing preventive care, coordinating care for the chronically ill, and modernizing our health care system through the use of electronic medical records. Instituting a paperless health information technology system could save \$165 billion per year – or \$2,200 for a typical family – according to an estimate by the Business Roundtable, AARP, and SEIU. To ensure that health care is affordable, under my plan, people who can't afford health care will receive a generous refundable tax credit so that their premiums never exceed a certain percentage of their income.
- **Improve Quality:** Close to one-third of the \$2 trillion spent in the United States goes to care that is duplicative and fails to improve patient health. I will work to improve the quality of care in our health care system by providing funding for research to encourage the development and adoption of consensus-based quality measures, so health care providers will have the best information possible to treat their patients. I will also establish an independent public-private Best Practices Institute. This institute will finance comparative effectiveness research, so that doctors, nurses and other health professionals, as well as consumers and businesses, know which drugs, devices, surgeries, and treatments work best. And I will offer higher reimbursement rates to health providers who provide high quality health care consistent with that research.
- **Ensure Affordable, Quality Coverage:** It unconscionable that today, in the richest country in the world, there are 47 million people without health insurance. And to the extent they receive care, it is all too often late, inappropriate, and expensive. Moreover, the cost of care is shifted to those who have coverage, increasing their premiums. Only through shared responsibility can we ensure quality, affordable care for all Americans. To achieve that goal, every stakeholder

– insurance companies, health care professionals, businesses, government, and individuals – must play a role in working to fix the shortcomings in our health care system. Under my plan, insurance companies will be prohibited from discriminating based on pre-existing conditions. Health care professionals will be empowered to provide high-quality care and will be rewarded for providing that care. Large employers will be required to provide health insurance coverage to their employees and small businesses will receive tax credits to offset the cost of providing health care. The federal government will ensure that insurance is affordable and never a crushing burden on any family by providing generous tax credits that will ensure that premiums never exceed a certain percentage of a family's income. And as health insurance become affordable, individuals will be required to have health insurance coverage.

## Question #2

**Overall do you feel that the United States spends too much or too little on health care and why?**

I believe that the United States spends too much on health care for the outcomes we see. We have some of the highest health care costs in the world, now totaling \$2 trillion, which is expected to double to \$4.1 trillion by 2016. And we spend more money per capita on health care, now almost \$5,700, than any country in the world even though we have a higher infant mortality rate than at least 30 other industrialized countries. On a per person basis, we spend 50 percent more than the next nation, and twice the average of competitor nations.

I believe that the rising cost of health care is a critical problem for all Americans. One of the biggest drivers of increasing health care costs is related to the small number of Americans who incur catastrophic expenditures, usually for the care of chronic diseases. That is why I will work to reform provider reimbursement in federal programs to provide incentives for the adoption of innovative models of care that have been proven to be effective in improving health status and outcomes, such as chronic care coordination, medical homes and other care models that emphasize patient-centered care. As mentioned above, my plan includes a series of system modernizations including the adoption of health information technology, e-prescribing, investing in research into best practices and quality measures, and an increased focus on primary care and prevention to assure that patients receive effective care.

## Question #3

When people talk about the need for health insurance, they often neglect to identify the real problem: improving the health of Americans. And health insurance rates alone do not tell us much about insurance type, affordability or quality of care. **Beyond the number of people with health insurance, how will you define and measure the success of your health proposals and their impact on health outcomes?**

We must shift our system from focusing on and providing sick care to focusing on and providing well care. My health care plan will help doctors achieve better outcomes by implementing programs that help us improve the quality of care. We need to invest in research to better understand which treatments and procedures work and provide incentives to health care providers to adopt that research. Most importantly, we need to return patients to the center of the health care system by educating patients on the importance of adopting healthy lifestyles and assuring that our health care system encourages early diagnosis and treatment to prevent chronic conditions before they occur. In addition to the agendas outlined above to lower cost and improve quality, my plan includes a strong emphasis on improving our health care workforce. As important as health insurance coverage is to early diagnosis and treatment of disease, access to care depends on the availability of qualified, high quality hospitals, doctors, nurses and other health professionals. In addition, we must support and improve our public health infrastructure including assuring adequate resources for safety-net providers such as public hospitals and community health centers. As health insurance coverage increases, Medicare and Medicaid disproportionate share hospital payments will decline under current law formulas that base payments on the amount of uncompensated care provided. I would recapture some of these dollars in a funding stream not subject to annual appropriations to invest in public health and safety-net providers.

#### **Question #4**

While the country has a clear interest in improving the health of its citizens, the incentives built into the system do not seem to promote that desired outcome. For instance, physicians are sometimes reimbursed in a manner that rewards the volume of care delivered without regard for quality. **How would your proposals realign incentives to change how insurers, providers and patients view their respective rights and accountabilities for health?**

I have proposed realigning federal reimbursement to encourage the expansion of effective models of health care delivery that promote successful quality patient-centered care models, such as chronic care management and coordinated models of care delivered by a team of health professionals to treat the whole patient instead of the patient's individual illnesses. We must also move from a system that rewards and prioritizes quantity of care provided to one that rewards and prioritizes quality. While Medicare has begun to compensate hospitals and physicians based on quality, experts agree that we must invest in research to develop consensus-based quality measures in many areas where they do not now exist, and to improve those that are now in place.

In addition, I would take a different approach to rewarding excellence for physicians. I have proposed utilizing a system that is just beginning to be adopted by the American Boards of Internal Medicine – an enhanced Maintenance of Certificate program that would increase reimbursement for physicians that meet quality standards, rather than reporting on individual quality measures. Physicians demonstrating their commitment to quality care through participation in certified Maintenance of Certification programs and, over time, show improved patient outcomes will be recognized as providers of high

quality care and will receive higher reimbursement in federal programs, such as Medicare and the Federal Employee Health Benefit Program. This approach should allow physicians to devote their time to patient care rather than cumbersome reporting processes.

### Question #5

Creating value in health care is of paramount importance, however, in our current system misaligned economic incentives thwart efforts to achieve this end. **Please discuss how your plan will create and measure value to ensure it is a vital component in America's health care system. Be certain to include specific metrics and case examples.**

As mentioned above, my health proposal would realign federal reimbursement to promote successful and innovative models of care and reward quality of care rather than quantity of services. In addition, I believe that patients and providers would benefit from having access to better information on what works in health care and how treatments compare to one another. Today, little is known about how these procedures stack up, so we end up paying for them all, even when they may do nothing to improve health. Researchers at Dartmouth College have found that more care is not better care, and that inefficient care may do more harm than good. Today, health care providers and patients are being bombarded with information. In the past decade, there has been an 80 percent growth in the number of drugs prescribed, 100 percent growth in new device patents, 300 percent growth in teaching hospital procedures, and 1,500 percent growth in diseases with gene tests. That is why I have proposed to create a Best Practices Institute because we need a more value-oriented health care system. This institute would compare the effectiveness of alternative treatments such as pharmaceuticals, devices, and surgical interventions. For example, information supplied by organizations such as the Drug Effectiveness Review Project has been used in North Carolina to educate providers and improve quality of care, saving the state an estimated \$80 million in 2003. This research will facilitate the development of quality and outcomes measures.

### Question #6

It is thought that as much as 40 percent of health care costs are related to behavior, such as smoking, eating an unhealthy diet, lack of exercise and alcohol consumption. At the same time, public health experts have shown that these choices are influenced by policy, the accessibility of healthy options, and corporate and social marketing. **How will you encourage healthy choices? How will you shape policy and incentives to encourage businesses to make choices that emphasize early health, wellness and prevention among their employees and customers?**

I want to shift the focus of our health care system from providing acute care and only treating the sick toward promoting health and well-being. That is why my health care plan focuses on preventing and detecting chronic diseases as well as managing care. While not all chronic diseases are preventable, many are. I will make it a condition of

doing business with the federal government that health plans cover high-priority preventive services. Covered services would be based on recommendations from the U.S. Prevention Services Task Force. Insurers would provide both individuals and providers with financial incentives, such as eliminating co-pays, for high-priority prevention services. My plan will also coordinate public spending on prevention across federal programs in the Department of Health and Human Services to maximize high-priority prevention. A public-private collaboration would ensure that prevention is pushed outside of the boundaries of the health care system and into schools, offices, supermarkets, and communities through free provision of preventive benefits. It would enlist a new prevention workforce including pharmacists, church leaders, and others who can best use funds to ensure 100 percent use of cost-effective prevention.

My plan will require coverage of preventive services that experts deem proven and effective – such as screenings for blood pressure, blood glucose, cholesterol, vision and hearing – that will keep people healthy and lower the incidence of disease. Under my plan, we will reward physicians who are committed to providing quality care that improves their patients' health outcome and we will ensure streamlined, coordinated care of chronic illnesses to improve quality and lower costs. In addition, the Best Practices Institute will ensure that health care professionals and patients receive up-to-date and accurate information about diseases, including chronic illnesses, and ways to prevent and manage them. I will also provide incentives for doctors to complete certification programs so that they are informed and able not only to treat but also to share this information with their patients. Promoting healthy lifestyles, preventing and managing diseases must occur in every sphere of life – in hospitals and doctors' offices, homes, schools, offices – among all Americans.

### **Question #7**

Simply having access to health care is not enough to achieve equity in health outcomes. Income level, race, gender and location are just a few of the factors that contribute to the health of Americans. For example, women are less likely to receive the cardiac care that they need and on average have outcomes worse than men. **How would your health care system promote greater equity of health outcomes among men and women of different races, income levels and geographic locales including, but not limited to, access to traditional insurance?**

While many factors contribute to the disparities in health outcomes, no factor matters more than access to health insurance. Minorities are more likely to be diagnosed with late-stage breast cancer and colorectal cancer compared to whites, and Hispanics hospitalized for acute myocardial infarction are less likely to receive optimal care. Infant mortality rates are rising among African American populations and are nearly twice that of whites. That is why my plan, which will cover every, will close the disturbing racial and ethnic health disparities that are pervasive throughout our health care system.

The goal of eliminating racial and ethnic disparities in our health care system demands solutions in every aspect of health care delivery. My health reform plan directs the Department of Health and Human Services to develop a uniform reporting format for the

collection of quality information on race and ethnicity, so that we can know the full extent of the problem and measure our progress in addressing it. It also provides \$50 million in federal funding for the development of culturally and linguistically competent clinical care programs, to ensure that our healthcare providers can communicate with their patients and have the necessary training and skills to fully understand and respect cultural differences in the patients they serve. Reducing racial and ethnic disparities should be included in the development and testing of quality measures for use by doctors, hospitals, nursing homes and other providers. And, finally, my plan addresses diversity and cultural competency in the health care workforce by providing opportunities and incentives to encourage greater diversity in our health care workforce through recruitment initiatives, scholarships and loan-forgiveness program.

### Question #8

With the right information at their disposal, consumers could take greater charge of their health, wellbeing, and illness. **To that end, what will you do to ensure that health information is readily accessible, meaningful, and accurate so that it helps people make decisions and take action?**

I will institute a new paperless health information technology system to modernize our health care system through the use of information technology that will empower doctors and other health care providers to communicate electronically and will reduce waste and redundancy while improving safety and quality by reducing medical errors. Today, 75 percent of health care claims are submitted electronically. However, only 71 percent of these claims are automatically adjudicated (i.e. processed without any manual intervention). Paper claims that are clean and have no intervention cost about \$1.60 per claim; however, electronic claims cost almost half that amount at \$0.85. Claims that require manual intervention/adjudication cost 40 percent more than an electronic claims. RAND estimates net saving to be \$77 billion per year if we adopted new technologies into our health care system. In order to achieve this, I will create system-wide savings from full use of health information technology (HIT) and bring a paperless revolution to healthcare by requiring providers participating in federal programs to adopt private, secure, and interoperable technology. We will also provide one-time financial assistance to up-front buyers to help doctor's offices adopt and implement HIT. HIT is an important tool to help ensure patients receive the highest quality. It will reduce the 200,000 adverse drug events, in which medication errors are avoided and roughly \$1 billion a year is saved.

### Question #9

For years, health care technology has been developed for use by doctors and other health care providers. Still, we lack wide scale use of electronic prescribing, electronic medical records and other important health information technology tools. **What specific incentives would you favor to enhance the adoption of health information technology? What will you do to encourage free and secure data sharing among providers for the benefit of patients?**

I will require providers participating in federal programs to adopt private, secure, and interoperable technology. In order to achieve this goal, I will provide an up-front and phased-out \$3 billion a year investment fund that will be provided to help hospitals and doctor's offices adopt and implement health information technology. I will also give doctors financial incentives to adopt health information technology and facilitate adoption of a system where high quality care and better patient outcomes can be rewarded. As Senator, I worked to propose the bi-partisan Health Technology to Enhance Quality Act, which would speed the computerization of health records and make those records available at any hospital nationwide. I was also a co-sponsor of the Wired for Health Care Quality Act, which would enhance the adoption of a nationwide interoperable health information technology system. According to the Institutes of Medicine, over 7,000 deaths occur each year due to medication errors with a total of 1.5 million preventable adverse drug events each year. I support the IOM's recommendation that all prescriptions should be transmitted electronically. In addition, I support providing financial assistance to physicians to assist in acquisition of equipment and training to achieve this goal.

#### **Question #10**

Given the rapid changes in how technology is used to deliver care and how biomedical breakthroughs are used to treat and predict disease, health care will need to be provided in innovative ways. **What will you do to encourage innovation in biomedical research, the science of prevention and the delivery of care? How will you promote the use of these advanced technologies to improve health?**

I have proposed increasing the National Institutes of Health's budget by 50 percent over five years and doubling it over 10 years. I believe this sort of investment will encourage innovation in biomedical research and the science of prevention. In addition, as President, I will end the ban on stem cell research. I believe that science, not narrow ideology, should drive our national research agenda. Stem cell research has the potential to transform lives, to help us find cures for illnesses including Parkinson's disease, heart disease, Alzheimer's disease, diabetes, Huntington's disease and spinal cord injury. In addition, I am also committed to increasing funding for the Centers for Disease Control and Prevention because investment in research is crucial to finding ways to improve the health and well-being of all Americans. And I will provide increased resources to Agency for Healthcare Research and Quality generally and to health services research specifically.

#### **Question # 11**

The range of health professionals needed is changing. Some groups have projected shortages in essential health providers ranging from nurses and primary care physicians to allied health professionals. **What would you do to encourage entry into and retention within these essential health fields?**

I have proposed to address critical shortages in health care professions and to work cooperatively with the nation's health care providers to improve quality of service. When I am President, I will ensure that we address the nursing shortage crisis. We must give nurses the training, education, and support they need to provide the care patients deserve. We need a comprehensive solution to deal with this problem, as we currently face a shortfall of more than 100,000 nurses. If we do not take action now, by the year 2020, the shortage may reach 1 million. I will provide federal funding to address nursing and nurse faculty shortages and nurse retention issues by establishing innovative training and mentoring programs.

We must also recognize, however, that there is more to solving the nursing shortage than just training more nurses. In many instances, nurses have left clinical nursing to accept positions in other areas because of low wages, long hours, and a lack of job satisfaction. As part of my quality initiative, I have proposed revising reimbursement in federal programs to encourage the development of new models health care delivery. Many of these models of care encourage a team approach to health care delivery, and would give nurses an expanded role in patient-centered care. To increase the number of direct support professionals, I will also make federal funding available to states, in partnership with local organizations, to develop credentialing programs for professionals like nursing assistants and personal care attendants. As a condition of receipt of grants, states must collaborate with state universities and community colleges to allow credentialing programs to count as college credit. In addition, as I mentioned above, I will offer higher reimbursement rates to doctors who participate in qualified Maintenance of Certification programs.

### **Question # 12**

**Do you feel that portability of health insurance is an important part of improving health? If so, how would you structure a portable health insurance system to make it affordable and effective?**

Yes. Under my American Health Choices plan, health care insurance will be portable. Americans will have the ability to retain the coverage they currently have, or may purchase coverage through a purchasing pool, much like the Federal Employees Health Benefit plan. If an individual changes jobs or loses their job and they were already receiving coverage through the purchasing pool, they could continue that coverage. If they were receiving coverage from their employer, they would be able to purchase similar coverage through the purchasing pool. Critical to their ability to buy coverage through the pool are insurance market reforms prohibiting plans from denying coverage or charging significantly higher coverage based on individual health status. Finally, health insurance coverage will remain affordable, because my plan includes tax credits for the purchase of coverage that would insure that premiums do not cost more than a certain percentage of family income.

### Question # 13

There is a great deal of evidence that policy decisions in areas such as education, taxes, environment and labor can have as much of an impact on people's health as policy decisions that address health directly. **How will you measure the health impact of your non-health policy decisions?**

I know that improving the health and well-being of Americans isn't limited to improving our health care system. As President, I will ensure that promoting good health and providing Americans with the tools to maintain their health are included in a variety of policies. For example, I will work to clean up our environment, which is not only important for the Earth but also for our health because we know that are connections between the environment and disease. I will also work to get junk food out of schools and to bring back physical education where those programs have been cut, to ensure that our children grow up with nutritious food and plenty of exercise. For American workers, I will ensure that they have the right to organize and bargain collectively for improved working conditions, higher wages, and quality health care. I will work to provide tax cuts for health care and long-term care so that Americans and their families have the financial means to access needed care. And I will work to bring economic justice to American families by ending the Bush tax cuts on the very rich, restoring fairness to the tax code, and investing in high-quality education that so that people can fulfill their potential.