

The Patient and Provider Perspective

on Healthcare Reform

Introduction:

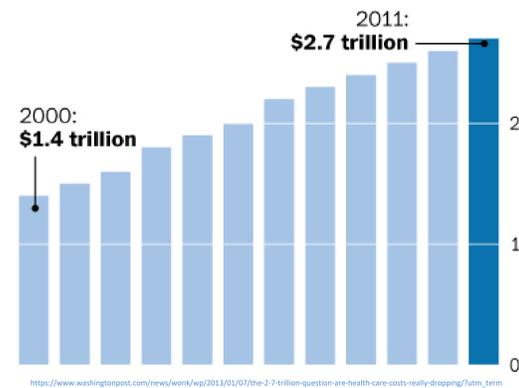
Advances and growth in the medical sciences have contributed to the increase in overall health and wellness of many individuals in society. Even with these advances, many members still suffer from a number of illnesses that are either preventable or treatable. In large part this is due to the lack of access to medical care and treatment of these illnesses.

The ultimate goal of healthcare reform is to provide more individuals with healthcare and to improve the quality of that care. However, much of the conversation about healthcare reform is dominated by political and economic disagreements. Politicians argue over their political implications and criticize or acclaim healthcare reform based on political ideologies. Affordability, accessibility, and quality of care are taken into consideration by policy makers, but they are sometimes overshadowed by political and economic disputes.

Patients and providers likely do not count politics and industry economics as their priority issues for healthcare reform.

Health care spending up

U.S. spending on health care rose 3.9 percent in 2011 to a total of \$2.7 trillion, or \$8,680 per person.



Literature Review:

Healthcare reform has had a difficult history in the U. S., facing substantial to complete opposition at different points in time. Healthcare reform was first passed in 1965 with the creation of healthcare regulations and Federally subsidized programs (Palmer, 1999).

The Patient Protection and Affordable Care Act (ACA), nicknamed "Obamacare" is practically synonymous with "Healthcare Reform" because it is the most recent, significant, and best known by the general public. The ACA was new legislation that expanded and amended much of previously enacted healthcare acts and regulations (H.R. 3590, 2010).

Although healthcare reform is meant to reduce patient out-of-pocket costs (i.e. deductibles and copays), many opponents of the ACA have claimed it has done the opposite (Mathews, 2016), while others say costs are rising due to other factors (Appleby, 2012).

Healthcare reform tries to increase the number of patients with access to adequate, timely, and appropriate healthcare (H.R. 3590, 2010). There are also resources other than direct medical care that patients need to improve overall health outcomes (Lantz et al., 2007).

Medicare is currently trading the "pay-for-service" compensation model for a "pay-for-performance" model which promotes quality over quantity (Tinnin, 2016). Other insurers are sure to follow Medicare's "Gold Standard" (Tinnin, 2016).

Research Question:

This research will focus on the patients' and providers' perspectives on three major healthcare issues: affordability, accessibility, and quality of care.

How has healthcare reform:

(Improved or weakened) affordability?

(Increased or decreased) accessibility?

(Enhanced or diminished) quality of care by changing accountability standards?



Significance:

Healthcare reform plays a major factor in the health outcomes of patients and the practices of healthcare providers. I expect to find that patients and providers have unique views on healthcare reform that differ from the beliefs of politicians, government agency employees, economists, organizations, and institutions. Patients and providers may have solutions to their particular problems that are missed by those with an industry perspective. These patient-provider solutions may help resolve issues at the industry level. This research will increase awareness and empower patients as well as providers. Their contributions and efforts to healthcare reform will help improve affordability, increase accessibility, and provide higher quality healthcare.

Methods:

1. Objective Data:

Objective data will be collected by following updates on healthcare reform through mainstream news outlets and verified through publications of Federal Agencies and Departments. This data will be used as a cross reference to compare and contrast with the data collected on patient and provider perspectives.

2. Subject Data:

Data will be collected through two online surveys, one for patients and another for healthcare professionals. Subjects will be recruited using a snowball sampling strategy. These surveys will consist of multiple choice questions for the convenience of subjects and streamlined analysis.

A. Patients-

This group of individuals will include members of the general public; healthcare professionals will be excluded from this group because of their unique position and perspective.

B. Healthcare Providers-

Although these individuals are at some point recipients of care they will only be asked to complete the survey created for healthcare providers.



References:

1. H.R. 3590, 111 Cong. (2010) (enacted).
2. Palmer, K.S. (1999). *A brief history: Universal health care efforts in the US*. Lecture presented at Physicians for a National Health Program Meeting, San Francisco.
3. Mathews, A. (2016). Inside the affordable care act's arizona meltdown. *The Wall Street Journal Eastern Edition*. Retrieved from <http://search.proquest.com/libproxy.csustan.edu/docview/1833978176?OpenUrlRefId=info:xri/sid:primo&accountid=10364>
4. Appleby, J. (2012). Factors driving up your health care costs. Retrieved from <http://khn.org/news/health-care-costs/>
5. Lantz, P., Lichtenstein, R., & Pollack, H. (2007). Health policy approaches to population health: The limits of medicalization. *Health Affairs*, 26(5), 1253-1257. Retrieved from <http://web.b.ebscohost.com/libproxy.csustan.edu/ehost/detail/detail?sid=157b143b-52cd-4334-924a-95321e5eac88%40sessionmgr102&vid=0&hid=102&bdata=JnNpdGU9ZWVhc3QtbGl2ZSZzY29wZT1zaXRl#AN=26658223&db=aph>
6. Tinnin, A.C. (2017). Why you should care how your doctor is paid. Retrieved from <http://patient.care/news/doctors-hospitals-other-providers/why-you-should-care-how-your-doctor-paid>