



LSNA's Questions Regarding Health Care Reform

1. How did ANA come to endorse H.R. 3200 over any of the other proposals for health care reform?
2. Does ANA have a position on S391, "The Healthy American's Act"? If so please share it with us.
3. Where does H.R. 3200 specifically address the priority of prevention, wellness and disease management and how does it ensure implementation?
4. Other than the sections which speak to providing additional budgetary dollars for more primary care medical students and midlevel practitioners, does H.R. 3200 identify an action plan to attract students into these areas of practice?
5. Does H.R. 3200 or any of the other reform proposals allow for full reimbursement for same services for all APRNs and incentives for states to remove the barriers to independent practice of NPs?
6. Are there provisions for shared decision-making between health care providers and their patients (clients) in H.R. 3200?
7. Has ANA had any discussion with members of congress on a specific action plan that will address how to change lifestyle choices of those whom we will now provide health care?
8. In a state that is already looking at cutting health care benefits to our Medicaid population due to the proposed increase state general fund dollars which will be needed for our federal match, we are concerned on if there will be additional mandates placed on states by health care reform?
9. How will health care reform be funded, especially if there is a governmental plan that many may chose or by default enrolled?
10. What information is available to show what percent of persons without insurance do so as a personal choice?
11. Will the penalty that is being talked about be incentive enough for persons to actually become insured?
12. Under the current federal programs, Medicare and Medicaid patients are offered choice of physicians, however there is no requirement that physicians take Medicare or Medicaid patients, or that they need to add new patients, how is this addressed in H.R. 3200?