News From Senate Finance Subcommittee on Health Care

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CHAIRMAN ROCKEFELLER OPENING STATEMENT "QUALITY HEARING: WHAT IS HEALTH CARE QUALITY AND WHO DECIDES?"

Good afternoon. I am thrilled to be here today with my friend and colleague, Senator Hatch, as we commence the first of many Subcommittee hearings on health care reform. I would also like to thank each of our witnesses for being here today, and I will introduce each of them shortly.

I have been working on health care policy for more than 25 years, and I have never been more hopeful about the prospect of reform – or more convinced about the overwhelming need for reform – than I am now.

We are on the brink of bringing real change to working families and it's about time. Will it be easy to do? No.

But nothing worth doing is ever easy.

Right now, we have an overwhelming opportunity before us to make sweeping changes to our health care system – and one of the most important changes is improving the quality of care delivered.

Too often, we hear stories of loved ones and strangers who have contracted infections or suffered greater injury than necessary because the care they received was not of the best quality.

This could be anything from a central line infection in a hospital to improper diagnosis and treatment for heart disease.

Creating a delivery system that rewards quality care and improves health outcomes is an absolutely essential part of health reform.

According to the Department of Health and Human Services, the United States will spend nearly \$8,160 per person on health care this year, more than any other country in the world.

Yet, more of our children die and we live shorter lives than almost any other developed country.

This is simply unacceptable.

Right now, we pay health care providers for quantity – the number of services delivered – instead of quality – whether or not the services provided actually improve patient health.

This must change. Now.

I believe we must significantly alter federal provider payment policy so that we only pay providers for achieving good health outcomes for patients.

In order to transform our system into one that promotes greater quality and improves patient health, we first need a solid understanding of the landscape of quality today.

We must know how the federal government defines health care quality for federal health programs.

We must also understand how the Department of Health and Human Services uses established definitions of quality to implement quality improvement activities in federal programs, like Medicare.

Finally, it is important to understand how all the public and private entities that deal with health care quality coordinate their efforts – and if there is room for improvement.

In the end, our goal is to improve health care quality in a way that is coordinated, meaningful, and reasonable for both providers and their patients.

We must get this right if we are to successfully reform health care.

We have three very experienced and knowledgeable witnesses with us today:

- First, we have **Dr. Carolyn Clancy.** Dr. Clancy is the Director of the Agency for Healthcare Research and Quality (or AHRQ). Thank you for being here, Dr. Clancy.
- Next, we have **Dr. Brent C. James** joining us from Senator Hatch's state Salt Lake City, UT to be exact. Dr. James is Chief Quality Officer and Executive Director of the Institute for Healthcare Delivery Research at Intermountain Healthcare. Welcome, Dr. James and thanks for traveling to join us.
- Last, but certainly not least, we have Dr. **Marjorie Kanof** with us this afternoon. **Dr. Kanof is** Managing Director of Health Care at the Government Accountability Office. Thank you for being here.

Our witnesses will help us gain a better understanding of the quality landscape today.

I look forward to their thoughtful testimony and now would like to turn it over to Senator Hatch for his opening statement.

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