

SUNA Position Statement

85-429

The Society of Urologic Nurses and Associates Position on Access to Health Care

America's effort to address the challenge of providing equitable access to health care is indeed a difficult task¹. There are multiple barriers that may influence or limit an individual's access to health care. These factors are often interrelated, which include: (1) lack of access to adequate and affordable health insurance and the lack of ability to pay for care²; and (2) problematic differences in health access outcomes that occur by gender, race/ethnicity, education, income, disability, geographic location, or sexual orientation³. Disparities in the health care delivery system have also impacted access to urologic health care which is cause for concern. The Codes of Ethics for Nurses developed by the International Council of Nurses⁴ and the American Nurses Association⁵ state that nurses have a shared responsibility with other health professionals and society to ensure initiation and promotion of community, national, and international efforts to meet the health and social needs of the public. It is the position of SUNA that urologic health care is the right of all people and no person should be denied necessary urologic health care services

It is the position of SUNA that:

- urologic health care is the right of all people.
- no person should be denied necessary urologic health care services based on gender, race/ethnicity, education, income, disability, geographic location, or sexual orientation.
- urologic health care should be administered in accordance with the six principles of care outlined by the Institute of Medicine. That is, care should be safe, effective, patient-centered, timely, efficient and equitable⁶.
- we promote awareness of the prevalence of limited health literacy which can adversely impact a person's ability to obtain, process, and understand health information and use that information to make appropriate decisions about one's health and medical care⁷
- we support initiatives that expand funding programs that assist people in paying for urologic health care services through shared leadership and funding responsibilities among government, healthcare organizations, employers, private insurers and consumers
- we encourage and assist trade, pharmaceutical, and other professional associations to take proactive roles on access-to-care issues

Background and Rationale

In 2001, the Institute of Medicine (IOM) released "Crossing the Quality Chasm: A New Health System for the 21st Century"⁶. In that report, the IOM detailed the inequities in access to care, type of care, and considerations for changes in health care delivery provided to various segments of the U.S. population. Further detailed were inadequacies

in the health care system's ability to address broader issues of care such as the increasing complexity of medical science, an aging population, increasing numbers of persons with chronic diseases, and an increasingly diverse population. The IOM report called on all stakeholders to commit to a "national statement of purpose" for the health care system.

Having health insurance coverage is strongly associated with the ability to access health care, but the U. S. health insurance system does not reach all Americans^{1,2,8,9,10}. Nearly 47 million Americans, or 16 percent of the population, were without health insurance in 2005, from the latest government data available^{9, 10}. In 2005, 27.4 million workers were uninsured because not all businesses offer health benefits, not all workers qualify for coverage and many employees cannot afford their share of the health insurance premium even when coverage is at their fingertips^{9, 10}. Millions of workers don't have the opportunity to get health coverage. A third of firms in the U.S. did not offer coverage in 2005¹¹.

Lack of insurance compromises the health of the uninsured because they receive less preventive care, are diagnosed at more advanced disease stages, and once diagnosed, tend to receive less therapeutic care and have higher mortality rates than insured individuals¹¹. The uninsured are increasingly paying "up front" before services will be rendered. When they are unable to pay the full medical bill in cash at the time of service, they can be turned away except in life-threatening circumstances¹².

Health literacy is the ability to obtain, process, and understand health information and to use that information to make appropriate decisions about one's health and medical care¹³. Large-scale national surveys conducted by the US Department of Education indicate that about one third of the American adult population (90 million Americans) has limited health literacy¹⁴. People with limited health literacy have less health knowledge, worse health status, and higher healthcare costs than individuals with adequate health literacy, even after controlling for potentially confounding socio-demographic factors¹³.

Clinicians routinely *underestimate* the prevalence of limited health literacy among their patients and frequently *overestimate* the ability of individual patients to understand the information they provide to those patients. Awareness of the prevalence of limited health literacy in a clinician's practice, however, can allow the clinician to modify communication methods to match the needs of patients¹⁵.

¹ National Center for Health Statistics. (2004). *Health, United States, 2004, with chartbook on trends in the health of Americans* (DHHS Publication No. 2004-1232). Washington, DC: U.S. Government Printing Office

² Starfield, B., & Shi, L. (2004). The medical home, access to care, and insurance: A review of evidence. *Pediatrics*, 113, 1493-1498

³ U.S. Department of Health and Human Services. (2000). *Healthy people 2010* (2nd ed.). Washington, DC: U.S. Government Printing Office. Retrieved January 12, 2008, from <http://www.healthypeople.gov/Publications/>

⁴ International Council of Nurses. (2000). The ICN Code of Ethics for Nurses. Geneva, Switzerland: Author.

⁵ American Nurses Association. (2001). Code of Ethics for Nurses with Interpretive Statements. Kansas City, Missouri: Author.

⁶ Committee on Quality of Health Care in America, Institute of Medicine, (2001), Crossing the Quality Chasm: A New Health System for the 21st Century, National Academic Press, Washington, DC

⁷ Committee on Health Literacy, Institute of Medicine, Nielsen-Bohlman LN, Panzer AM, Kindig DA, eds. Health Literacy: A Prescription to End Confusion. Washington DC: The National Academies Press; 2004

⁸ Center for Disease Control/ National Center for Health Statistics, (2007). New CDC Report Documents Percentage of People Without Health Insurance. Retrieved January 12, 2008, from <http://www.cdc.gov/nchs/pressroom/07newsreleases/insurance.htm>

⁹ US Census Bureau News, (2004). Income Stable, Poverty Up, Numbers of Americans With and Without Health Insurance Rise, Census Bureau Reports. Retrieved January 12, 2008, from http://www.census.gov/Press-Release/www/releases/archives/income_wealth/002484.html

¹⁰ National Coalition on Health Care, (2008). Health Insurance Coverage. Retrieved January 12, 2008, from <http://www.nhc.org/facts/coverage.shtml>

¹¹ The Henry J. Kaiser Family Foundation. Employee Health Benefits: 2006 Annual Survey. 26 September 2006.

¹² The Henry J. Kaiser Family Foundation. The Uninsured: A Primer, Key Facts About Americans without Health Insurance. January 2006.

¹³ Weiss BD. Assessing Health Literacy in Clinical Practice. Medscape, LLC (2007) Retrieved January 12, 2008, from <http://www.medscape.com/viewprogram/8203>

¹⁴ Kutner M, Greenberg E, Jin Y, Paulsen C. The Health Literacy of America's Adults: Results From the 2003 National Assessment of Adult Literacy (NCES 2006-483). Washington, DC: National Center for Education Statistics, US Department of Education; 2006.

¹⁵ Katz MG, Jacobson TA, Veledar E, Kripalani S. Patient literacy and question-asking behavior during the medical encounter: a mixed-methods analysis. *J Gen Intern Med.* 2007;22:782-786.

Approved by SUNA Board of Directors, March 2008

Reaffirmed by SUNA Board of Directors, January 2014