



**HEALTH POLICY
HANDBOOK[©]**

**DEVELOPED FOR
THE CASE MANAGEMENT SOCIETY OF NEW
ENGLAND**

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Case Management Society of New England

Health Policy Committee Guidelines

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Section I

ESTABLISHMENT OF HEALTH POLICY COMMITTEE AND POLICY Case Management Society of New England Health Policy Committee

Introduction:

Case managers represent their own professional practice and the clients they serve. They should be able to influence public policy in our constantly changing healthcare environment. Case managers should have a clear understanding of our legislative process and how it affects their personal and professional life. Case managers need to understand the legislative and regulatory processes at the national, state and local levels, to know how and when to take action to intervene for their clients and themselves.

This body of information has been put together to serve as a reference tool for the Chapter. Our organization is a recognized professional entity involved with promoting educational opportunities for our members. This Committee has been given the task of supporting these goals in the area of legislation and health policy.

The Health Policy Committee, under the auspices of the Chapter and having an Executive Board Liaison, have identified goals and objectives and have also established some informational tools to help members become involved in understanding the legislative process. We will be communicating key items that could affect our practice, on a regular basis, through the Newsletter, *The Facilitator* and at Chapter meetings.

This Committee will attempt to keep you abreast of key legislative developments and will offer suggestions for action. Members can take action on an individual basis, but cannot in anyway imply that they are an official representative of CMSNE or CMSA, or that we are representing their employer unless they have been designated to do so officially.

Purpose and Objectives:

The purpose of our Chapter Health Policy Committee is to serve as a communication and educational resource on health policy issues related to our profession, for the Executive Board of the Chapter, which will then be directed toward the membership. The committee is dedicated to guiding and aiding the Chapter in the development of processes that will help and/or assist the profession and goals of case management.

The Goals of the Health Policy Committee are as follows:

- To educate members on the basics of the political process.
- To serve as an educational resource for members about specific programs related to health policy issues.
- To establish a resource guide that outlines the legislative process.
- To disseminate information by means of articles in the Chapter Newsletter, *The Facilitator*.
- To review the legislative literature as available and advise CMSNE's Executive Board on the political implications of such.
- To track and report on legislation affecting case managers and the profession of case management under the auspices and guidance of the Chapter.
- To report on health policy issues from the national, state and local arenas at chapter meetings, as needed.
- To actively network with other professional organizations.
- To participate in health policy initiatives, when directed to do so by the Executive Board of CMSA/CMSNE.

The Health Policy Committee shall be composed of:

- An Executive Board Liaison from CMSNE.
- A chairperson designated by CMSNE Board of Directors, who is a current, active member of the Chapter.
- Representatives from each extension or at least 2 volunteers, who are current Chapter members that have demonstrated a definite desire to be a participant on the committee for a period of at least one full year.
- A representative from the Health Policy Committee will be sponsored by CMSNE and designated as a participant in the Nurse-in-Washington Internship in Washington D.C., when voted upon by the Executive Board. The Executive Board Liaison, with the expectation of the nominee serving as chair of the Committee the following year, will make the participant's nomination.
- The Chair of the Committee (or designee) will represent the chapter on the MCNO (Massachusetts Council of Nursing Organizations) and report on the meetings in the *Facilitator*.

Defining goals on the Chapter level and maintaining an active Health Policy Committee is a powerful way to enhance the political power of the Case Management Society of New England, as well as establishing a proactive alliance with CMSA.

Section II

GUIDE TO BASIC GOVERNMENT OVERVIEW

There are three branches in the US Government: The Executive (President), The Judicial (Judges) and Legislative (Congress). As healthcare professionals, we would be in contact with the legislative branches. Together the U.S. House of Representatives and the U.S. Senate are identified as Congress. There are 100 senators (two from each state) and 435 representatives (apportioned by population). National elections for all members of the House and one-third of the Senate occur every two years. Each Congress has two one-year sessions. Consecutively, these sessions are referred to as the first and second sessions.

During each session of Congress, thousands of legislative proposals (called bills) are introduced in both the House and the Senate. A significant number of these proposals are healthcare-related.

As bills move from stage to stage, interested parties offer numerous opportunities for comment and change. Only a few bills survive the legislative process before they become public law. Individuals in healthcare need to understand how our laws are developed.

IDENTIFYING YOUR LEGISLATORS AND UNDERSTANDING THEIR PLATFORM

Each state has two elected senators. A senator must be at least 30 years of age, a resident of the state from which he or she is elected, and have been a U.S. citizen for at least 9 years. Senators are elected to 6-year terms, with a third of the seats on the ballot every 2 years.

The 435 seats in the House of Representatives are apportioned among the states on the basis of population, with members representing districts of roughly equal size. A House member, elected for a two-year term, must have been a U.S. citizen for at least 7 years.

You are therefore represented in Washington by a total of three legislators: two senators and one representative. You can identify these individuals by taking any of these steps:

1. Checking your local newspapers.

Newspapers frequently list the names, addresses and telephone numbers of offices of national congressional representatives. Articles frequently appear describing the representatives' activities and their scheduled visits to the area.

2. Visiting your local library.

The librarian can assist you in identifying your legislators in addition to sharing resources available for following legislation on the state and national levels.

3. Contacting your local Board of Elections.

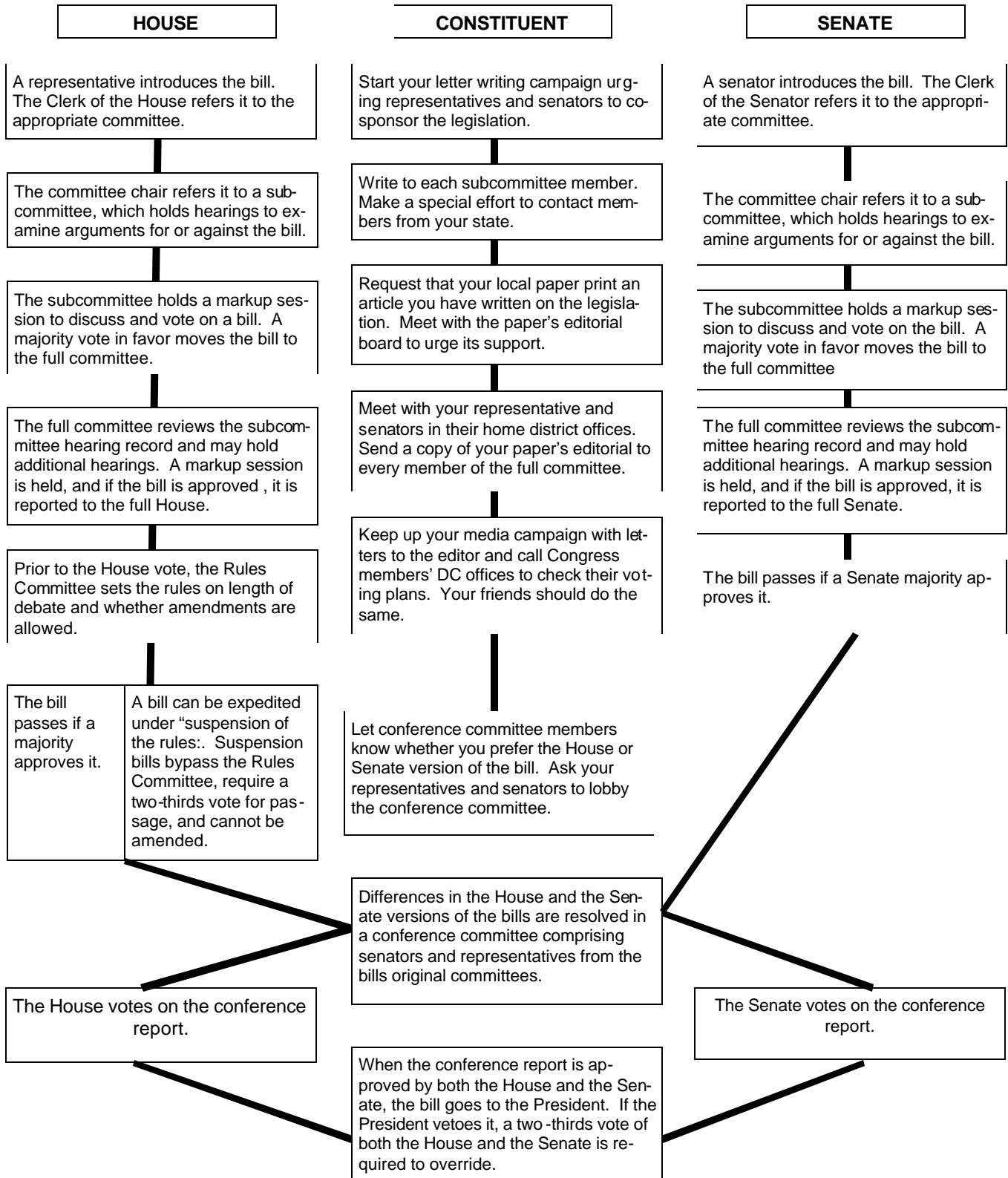
You are entitled to know your legislator's position on issues. Most legislators mail regular newsletters to their constituents describing their activities and soliciting feedback. You may also call or write their offices for copies of position papers or ask how they feel about topics important to you.

When contacting your senator or representative, do not hesitate to speak with a legislative aide. These aides often have much more time to spend with you, learn of your concerns, and answer your questions. You can be certain your issues will be brought to the attention of your legislator, sometimes more effectively than you speaking directly with him or her.

Local party headquarters can supply copies of legislators' campaign materials and voting records.

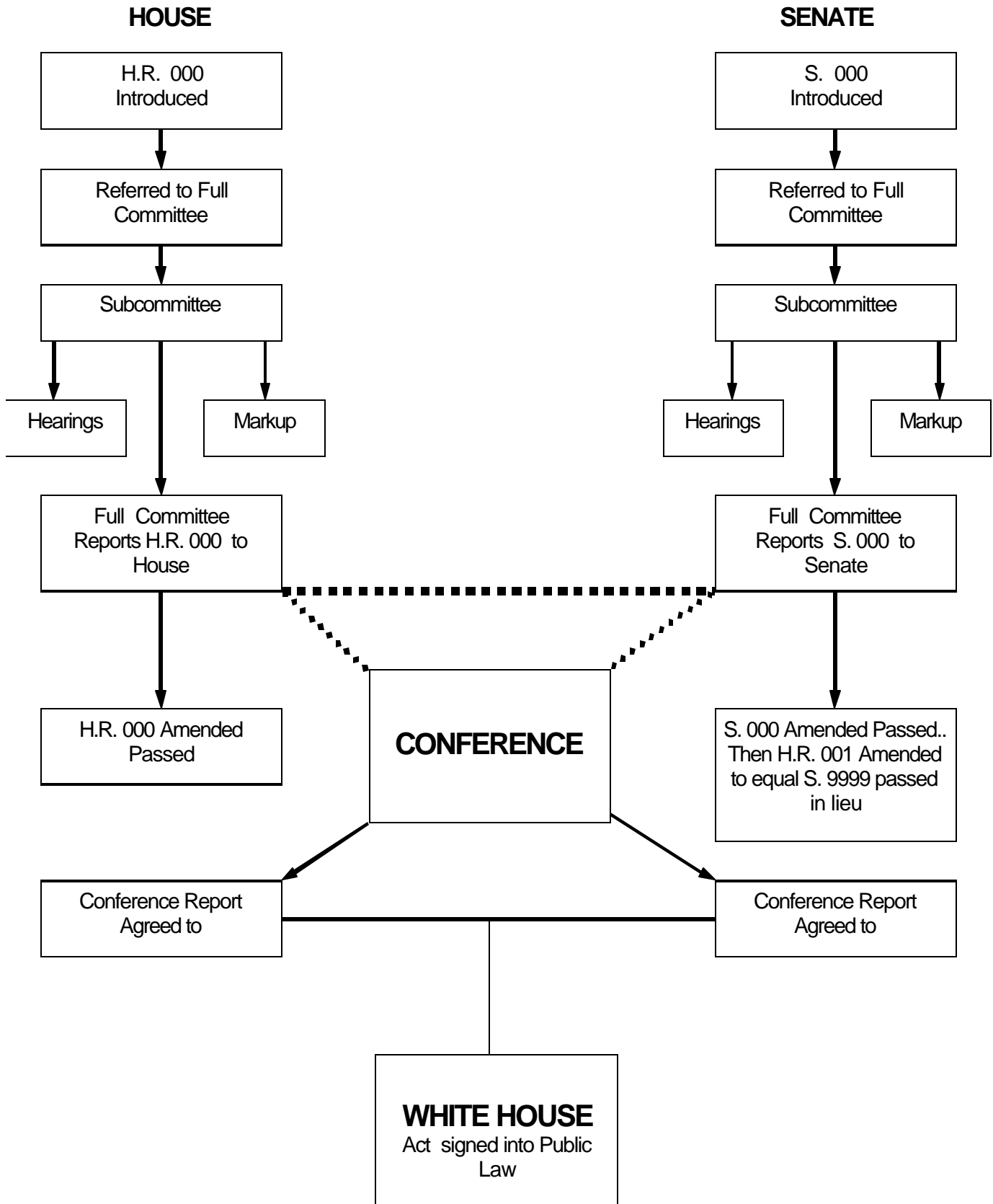
The local chapter of the League of Women Voters is also an excellent source for information

HOW A BILL BECOMES A LAW



The Path of Legislation

A TYPICAL EXAMPLE



Bill Designations:

H.R. – The initials “HR” before the number designate a bill originated in the House and means “House of Representatives”.

H.J. RES – Designates a House Joint Resolution. Either “HR” or an “H.J. RES” becomes a law when passed by both the House and the Senate in identical forms and signed by the President. In practice, there is little difference between the content of a bill and that of a joint resolution. The most common usage of “H.J.RES.” is to continue an existing law. A joint resolution to amend the Constitution does not require the President’s signature but must be approved by two-thirds vote of each chamber.

H.CON.RES. – Designates a House Concurrent Resolution. Must be approved by both the House and Senate before it can become effective. A concurrent resolution does not require the President’s signature and does not have the force of a law. It expresses the opinion of Congress and is used to take joint action.

H.RES. - Designates a simple House Resolution, the authority of which extends only to the House itself. Used primarily to bring before the House a rule from the Rules Committee, which provides the floor consideration of a specific bill. Also used to create a special House Investigating Committee, to change House rules, and to express the House will on specific matters.

S. – Senate bills are designated by the letter “S.” and followed by the assigned number. The designation of Senate resolutions is similar to those of the House except that “S.” is substituted for “H.” (E.g. S.J.RES.)

SENATE AND HOUSE COMMITTEES FOCUSING ON HEALTH:

Each house of Congress has developed committees with a major focus on healthcare issues. It benefits you to know who sits on these committees because you may, in fact, be a constituent of a committee member or chair, and therefore have power to affect change.

Your local library or the offices of your congressional representatives can provide you with the names of the members of each of these committees.

SENATE COMMITTEES WITH A MAJOR FOCUS ON HEALTH:

Appropriations Committee

- Labor, Health and Human Services and Education Subcommittee (includes funding for Department of Health and Human Services (DHHS), National Institutes of Health (NIH), etc.)
- Agriculture and Related Agencies Subcommittee (includes Food and Drug Administration, Women, Infants, Children (WIC), Foreign Food Assistance)

Budget Committee

Finance Committee

- Health Subcommittee
- Social Security and Family Policy

Labor and Human Resources Committee

- Aging Subcommittee
- Children, Family and Drugs Subcommittee
- Handicapped Subcommittee
- Education, Arts and Humanities

Veterans Affairs Committee

Select Committee on Indian Affairs

Special Committee on Aging

HOUSE COMMITTEE WITH A MAJOR FOCUS ON HEALTH:

Appropriations Committee

- Labor, Health and Human Services and Education Subcommittee
- Rural Development, Agriculture and Related Agencies Subcommittee

Budget Committee

- Health Task Force

Education and Labor Committee

- Health and Safety Subcommittee
- Post Secondary Education Subcommittee

Veterans Affairs Committee

- Hospital and Health Care Committee

Ways and Means Committee

- Health Subcommittee

Select Committee on Aging

- Health and Long-Term Care

Select Committee on Children, Youth and Families

Select Committee on Hunger

**Section III
NEW ENGLAND LEGISLATORS**

The following pages are designed to identify the lawmakers in each state of the Chapter. The goal is to keep their names and telephone numbers easily accessible.

Congressional Representatives:

The Two US Senators are:

Senator _____

Senator _____

Address: _____

Address: _____

Phone #: _____

Phone # _____

E-mail Address: _____

E-mail Address _____

Committee on which he/she serves:

Committee on which he/she serves:

Aides: _____

Aides: _____

The US Representatives per District are:

Representative _____

Representative _____

Address: _____

Address: _____

Phone #: _____

Phone# _____

E-mail _____

E-mail _____

Committees on which he/she serves:

Committees on which he/she serves:

Aides: _____

Aides: _____

State Legislators:

Senator: _____

Representative: _____

Address: _____

Address: _____

Phone #: _____

Phone: _____

E-mail _____

E-mail _____

Committees on which he/she serves:

Committees on which he/she serves:

Aides: _____

Aides: _____

Section IV GETTING INVOLVED

GETTING INVOLVED IN THE POLITICAL ARENA:

Political action means caring about issues you value and offering your expertise and opinions to create social change. With this in mind, it is clear that as case managers we are uniquely qualified. Case managers offer a perspective and expertise that is unmatched in caring for the disabled, elderly, and functionally limited people of our society.

Your role can be that of a citizen caring for the greater whole, or that of a professional and consumers of healthcare.

Participation is the key element to successful influence. First, you must be a registered voter. A failure to vote is a form of apathy. Those who are apathetic cannot create change. If you are not currently registered, contact your local board of elections about requirements to register.

Investigate your values and study the preferences of each political party. Getting involved on the local level helps to identify your ideals and the people who speak for them. Working on local issues and campaigns increases your awareness of how the political system works, and can acquaint you with many political contacts that may be useful at a later time.

The media is a wonderful source of information regarding current policies, issues, and congressional news.

Congressional hearings, many held in local districts, are a source of information and an opportunity to raise your opinions and concerns.

Getting involved is easy once you identify information sources, and learn when and with whom to communicate.

As an **individual**, you have the right to express your opinion regarding an issue that concerns you. When doing so, identify yourself as a case manager, illustrating your credibility and authority.

You cannot imply in any way, that you are an official representative or spokesperson for CMSA or CMSNE unless you are specifically designated to do so. Do not claim to represent your employer. You are simply speaking as an individual who is a case management professional and who, coincidentally, holds these titles and memberships.

List all affiliations and titles in your communications with legislators merely to establish your own credibility and to make clear the perspective from which you view the issue at hand.

HOW AND WHEN TO COMMUNICATE WITH YOUR LEGISLATOR

Members of the United States Senate, the House of Representatives, and your state legislatures should be aware that case managers are part of their constituencies. You are responsible for informing those in public office of your legislative interests and those of your clients. You have expertise in specific areas that most legislators do not. Sharing your expertise helps them make the best possible decisions for all of us.

You should contact your legislator:

1. To let your legislator know that you follow his or her activities and voting record and have an interest in how he or she votes.
2. To express an opinion or state a position on an issue.
3. To share your thoughts, knowledge, or research on an issue.
4. To thank the senator or representative for introducing or supporting a bill of interest to you.

A. WRITING LETTERS/EMAILS

Writing personal letters or sending e-mails is a very effective means of communicating with your legislators. It is also a comfortable means, because it gives you time to think about, formulate, and edit what you want to say. It also gives your legislators and their staffs a chance to read and digest the information and research their response. The correspondence has the added advantage of being a written record for future reference.

SUGGESTIONS FOR WRITING EFFECTIVE LETTERS

1. Use the correct name, address, and salutation.

Misspelled names and incorrectly addressed letters are annoying and may not reach the intended person.

Letters to members of United States Senate should be addressed to:

The Honorable (Full name without prefix)
United States Senate
Washington, DC 20510

Salutations should be "Dear Senator Doe." In person, Senators are usually
Addressed as "Senator Doe."

State legislators are usually addressed in the same manner.
Send their letters to your state capitol.

Letters to members of the United States House of Representatives should be addressed to:

The Honorable (Full name without prefix)
United States House of Representatives
Washington, DC 20515

Salutations should be "Dear Mr. (or Ms.) Doe."

Representatives are usually addressed in person simply as "Mr. (or Ms.) Doe."

When you are following legislation, make sure you know whether it is a state or national issue and address your letters to a legislator at the appropriate level.

2. **Identify yourself.** As stated previously, indicate your professional affiliations, if that is appropriate, **but do not speak for CMSA/CMSNE unless you have been so authorized to do so.** Be sure you are well informed on the issue and present it in an intelligent, well-considered manner. Do not be afraid to speak for yourself as a citizen, as a case manager, and as an advocate for your clients. When

doing so, use personal stationery. Sign your name legibly and include your address and phone number somewhere in the letter so your legislator can respond to your concerns. Send copies of your correspondences and responses received to the CMSNE Health Policy Committee.

3. **Make your correspondence brief, specific, and straightforward.** Legislators are very busy and receive many letters every day. Letters should be clearly worded and easily understood, but also should cover the topic completely. Try to restrict your letter to one side of one page and identify the issue in the first sentence. (Long letters may be placed on the bottom of a tall stack of mail for reading at a later date.) Confine comments to one subject per line. Legislators often file correspondence by subject for later reference, or assign it to a specific legislative aide for further research. This is difficult to do if more than one issue is addressed in any one letter.
4. **Identify references to legislation correctly by number and title.** Make sure you know the issue and the current status of the piece of legislation. Use the current bill number (If the legislation was filed in a previous year, check for the current bill number.) and correctly identify the chamber where it is being considered (HR for House of Representatives and S for Senate). Identify the primary sponsor when possible, i.e., “Senator Kennedy’s health insurance bill.” When writing your senator, refer to the Senate version of the bill and the Senate sponsor; when writing a representative, refer to the House bill and the House sponsor. Identify the proposed legislation by title, a word or phrase (HR 925, The Family and Medical Leave Act).
5. **Use your own thoughts and words.** Form letters, even handwritten are easily identified and have little impact. Any request to a legislator is worthy of a carefully written individual letter and has great impact. **Legislators estimate that for every personal letter received in their offices, there are another 200 constituents who share the same opinion but did not take the time to write.** It is not necessary to type your letter, but make sure it is easily readable (clearly printed or handwritten). Make sure it looks personal by using personal stationery.

Address the issues from your clinical and personal experience. Tell how you see the problem or proposed legislation affecting you, your practice, your clients, your community, and the total healthcare delivery system.

6. **Back up your position with supportive evidence.** Legislators require confirmable data and research, not just opinions, to formulate policy. Humanistic, emotional arguments are not enough. The legislator needs facts, figures, and knowledge of the economic impact.
7. **Time your letter appropriately.** Legislators need information, while there is time to take action. The letter should arrive after a bill has been formally introduced, and while it is up for study and action in the committee. By the time a bill passes out of committee to the floor, it is usually too late for a legislator to have much of an impact on it.
8. **Send a thank-you note when you have had a personal response regarding the impact of your letter.**

SAMPLE LETTER A: Requesting support or opposition

Date

Representative

Senator

The Honorable (Full Name)
U.S. House of Representative
Washington, DC 20515

The Honorable (Full Name)
United States Senate
Washington, DC 20510

Dear Mr./Ms. (last name)

- I. A brief history or explanation of exactly what you are attempting to gain support of or opposition to, including the bill number and/or name.
- II. The supporting evidence for your stance on the issue.
- III. The actual request for support or opposition.
- IV. An inquiry about what the legislator's stance will be.
- V. A thank-you for reading your letter and for the consideration the legislator will give to the matter. Offer your continued assistance. (You may want to request a personal visit at this time; however, a second letter specifically requesting a personal visit is recommended.)

Respectfully yours,

Your name, address, and telephone number.

Source: American Association of Nurse Anesthetists (1983). Handout distributed at the Nurse-in-Washington Internship, Washington, DC, 1987

SAMPLE LETTER B: Expressing appreciation for support or opposition

Date

Representative

Senator

The Honorable (Full Name)
U.S. House of Representative
Washington, DC 20515

The Honorable (Full Name)
United States Senate
Washington, DC 20510

Dear Mr./Ms. (last name)

- I. The expression of appreciation.
- II. A brief statement of what the representative or senator supported or opposed.
- III. Why you felt his or her decision was right, other than the fact that you agree with it.
- IV. A final thank-you.

Respectfully yours,

Your name, address, and telephone number.

Source: American Association of Nurse Anesthetists (1983). Handout distributed at the Nurse-in-Washington Internship, Washington, DC, 1987.

SAMPLE LETTER C: Requesting the opportunity to speak with the legislator and/or his staff

Date

Representative

Senator

The Honorable (Full Name)
U.S. House of Representative
Washington, DC 20515

The Honorable (Full Name)
United States Senate
Washington, DC 20510

Dear Mr./Ms. (last name)

- I. A brief history or explanation of exactly what you are attempting to gain support of or opposition to, including the bill number and/or name.
- II. The supporting evidence for your stance on the issue.
- III. The request for the opportunity to meet with the senator or representative in person to discuss the issue.
- IV. The names of any staff personnel with whom you would like to meet at the same time, if you know them. If you do not know any names, ask the legislator to include staff members at his or her discretion.
- V. A thank-you for reading your letter and statement of anticipating a prompt reply.

Respectfully yours,

Your name, address, and telephone number.

Source: American Association of Nurse Anesthetists (1983). Handout distributed at the Nurse-in-Washington Internship, Washington, DC, 1987.

B. TIPS FOR PERSONAL VISITS WITH LEGISLATORS

PERSONAL VISIT

Attempting direct, personal contact with your legislator can be very important, but also very frightening when done for the first time. The best approach is to prepare yourself as thoroughly as possible and try! Remember, your legislator have been elected by your to serve your needs and they are most concerned about doing their jobs well so you will re-elect them for another term. They need to know the concerns of their constituency. Appointments must be made in advance. All legislators have at least two offices, one in Washington (or the State Capitol) and one in their home district. Visits can be made in either place. Arrangements can be made to meet with the legislator as he or she makes periodic visits throughout their district.

1. Call the local district office if you wish to meet with the legislator while he or she is there (the number can be obtained from local library, newspapers, party offices, etc.) If you want to meet with him in Washington, call the U.S. Capitol Operator at 202-224-3121 and ask for your member's office. (The use of the term "member" refers to either senator or representative.)

When you are connected with the office, ask for the appointment secretary, or, if the secretary is not available, ask for the health legislative assistant.

2. State that you are a constituent who would like to meet with the member to discuss (your specific issue) and how it is affecting you and people in your state/district.
3. Be sure to confirm the secretary's name, the specific time, place and date of the appointment.
4. If you are told that the member will not be available to meet with you at the time you are available, ask to meet with the legislative assistant for health. Remember that staff plays a very important role in a congressional office, and a meeting with congressional staff is very effective.

Be prepared for your visit. You will probably only have 10-15 minutes of your legislator/aid's time, so be organized to accomplish as much as possible in that time.

1. **Write out three reasons why you either support or oppose the issue or proposed legislation.**
2. **Describe your case management experience as it relates to the issues.** To help you describe your experiences, you might finish the following sentences:
In my experience as a case manager, I have seen _____; patients I care for need _____.
Case management can be used to save _____ dollars in my state by _____.
3. **Bring facts, figures, and data** about what the program means and how many people will be affected in your state.
4. **Be prepared to state your issue and concerns succinctly, in no more than 5 minutes.** (You may want to have your thoughts written down in outline form).
5. **Have some idea of his or her position on the issue**, past votes on similar legislation, and legislative and personal interests to help you tailor your arguments.
6. **Know both sides of the issue and be prepared to respond to questions.** Be aware of opposing arguments and political liabilities.
7. **Role-play your visit with someone else.** Anticipate different responses to your presentation (acceptance, skepticism, indifference, objection) and act out how you would respond in each instance.

The day of your appointment:

1. **Be on time** --- or better yet, a few minutes early.
It is a good idea to present a business card to the receptionist upon arrival in the congressional/state office. This eases name pronunciation and can be left behind for future reference. (You want to encourage them to keep it on file to ease in contacting you for future opinions.)
2. **Be personable.** Maintain control, however, and do not be distracted from the real purpose of your meeting.

3. **Identify the subject of your meeting.**

Present your facts in an orderly, concise manner. You should know the following:

Name of bill

Bill number

The current status of the bill

Any similar legislation in the other house and its status

Reason to support your position

What the desired action will do for patient care in your state/district

4. **Expect to be interrupted several times during your meeting by telephone calls or the member's staff.** Most members will ask one of their legislative assistants to participate in the meeting. Remember that the staff plays a very key role in a congressional office. You should be aware that on some occasions, the member's schedule might be such that he or she will see you for only a few moments. In those instances, the legislative assistant will complete the meeting. Although this may not be as satisfactory as a "one-on-one" meeting with the member, **it is not a waste of your time**. The congressional aide is quite familiar with the member's position on your particular issue and is relied upon by the member to assemble constituent views on the issue.

Be prepared to answer these typical questions and outline your presentation this way:

What issues most concern you in your city and state?

In your experience, in your work situation in your city and state, what is the most "pressing" healthcare need you see for your patients?

During the meeting, the member or legislative assistant may try to persuade you to change your position. Do not be intimidated into agreeing with something that you cannot support! Stick to your position.

5. **When concluding the meeting, leave fact sheets about your specific issue.**

Try to answer "who, what, when, where, and how much". Have your name and address on the fact sheets so you can be contacted for more information. Seek their business card, if needed.

Thank the member/staff for the time and courtesy offered you and leave promptly.

6. **Send a follow-up letter thanking the member and the staff for the meeting.** Review the issue(s) discussed briefly, summarizing the pertinent points once again and providing any further information provided.

7. **Send a copy of all correspondence with your members of Congress to the CMSNE Health Policy Committee.** This will enable them to monitor your interactions with Congress.

Final points to remember:

- Be polite and courteous. Do not confront, threaten, pressure, beg, or attempt to back a legislator into a corner.
- Even if you disagree or feel strongly about a subject, remember to present your argument in a positive, rational, defensible manner. Legislators and their staffs usually are willing to discuss points of difference in an intelligent manner.
- Understand that your legislator has many different constituents with many differing opinions, needs, and concerns that he or she must balance and prioritize.
- Understand that legislation becomes law through compromise. Do not ask the impossible. Legislators must balance all views on a bill, use their best judgment, and decide the issue on its merits. Your job is to inform them how you and your clients will be affected.
- Remember, you have performed a valuable service! We hope you will continue to keep your legislators informed. Let the Health Policy Committee know if you need any further assistance.