

## SUBJECT INDEX

- academics, vs. clinicians, 157  
access to health care: differential, 117–118; limiting, 238; and racial disparities, 138; and resources, 80; and variations in spending, 157  
accountability: lack of, 170; public, 142  
accountability for reasonableness, 240–243; challenge of, 247; effectiveness of, 244; in practice, 242–247  
Accreditation Council for Graduate Medical Education (ACGME), 166, 173, 209  
accreditation surveys, 165  
Acheson report, 125  
Addams, Jane, 19  
adolescents: and firearm policy, 91; health problems of, 20–21; illegal firearms obtained by, 93; suicide of, 94  
adverse selection, 40, 41, 226  
advertising: bans on food, 110; cigarette, 101; public-service, 111; tobacco, 106  
Aetna, 246  
African Americans: and health disparities, 118–119; and segregation, 118–119; and socioeconomic status disadvantages, 125; substance abuse of, 117. *See also* blacks  
Agency for Healthcare Research and Quality (AHRQ), 155, 164, 166, 167, 168, 172, 245, 246  
aging, 191–192. *See also* elderly  
AIDS, 17; deaths from, 154; and health disparities, 80; private coverage for, 45; response to, 21  
air bags, 79  
Alaska, tobacco-control program of, 104  
alcohol abuse: disability because of, 199; and public health, 107–108; and socioeconomic status, 117  
*Alexander v. Sandoval*, 137, 142, 143, 144–145  
Allina, 166  
“all products” clauses, 140  
alternative medicine, 42–43  
Alzheimer’s disease, 217  
ambulatory surgery, 218; centers for, 56–57, 213; and Stark regulations, 64  
American Academy of Family Physicians, 201  
American Academy of Pediatrics, 91, 208  
American Association for the Advancement of Science, 163  
American Board of Family Practice, 211  
American Board of Medical Specialties (ABMS), 166, 173, 209, 214, 215, 216, 218; “maintenance-of-certification” programs of, 206, 218  
American Cancer Society (ACS), 104  
American Civil Liberties Union (ACLU), 94  
American College of Obstetricians and Gynecologists, 208  
American College of Physicians, 166  
American Hospital Association (AHA), 155, 166

- American Indians, 81; and health disparities, 118–119; mortality of, 119; and segregation, 118; and socioeconomic status disadvantages, 125
- American Medical Association (AMA), 17, 153, 208
- American Psychiatric Association (APA), 238, 243, 244
- Americans with Disabilities Act (2002), 197
- Annenberg Foundation, 163
- antismoking campaign, 113; cigarette taxation in, 105; evaluation of, 106–107; first phase, 100–102; second phase, 102–103; third phase, 103–104; and tobacco industry, 106
- appeals process: and limit setting, 240–242; for Medicare, 193; posting decisions, 245
- Arizona: antismoking legislation in, 102; tobacco-control program of, 104
- arthritis: disability caused by, 192; of major weight-bearing joint, 198; uninsured adults with, 200
- Asian and Pacific Islanders: mortality of, 119; socioeconomic status differences among, 119–121
- asthma rates, rising, 78
- baby boomers, 202
- Balanced Budget Act (1997), 55, 56, 57, 196
- behaviors: individual health, 74; maladaptive, 75
- “best practice”: collaboratives, 154; social obligation for, 159
- Betsy Lehman Center for Patient Safety and Medical Error Prevention, 154
- birth control, 20
- blacks: immigrant groups, 121; life expectancy for, 121, 122; mortality of, 119. *See also* African Americans
- Blue Cross plans, early, 38
- breast cancer: bone marrow transplant for, 238; deaths from, 154
- Brigham and Women’s Hospital, 155
- British National Health Service, 124
- Bureau of Alcohol, Tobacco, and Firearms, 93
- Bush, George W., 28, 189, 197
- Bush administration (2003), and Title VI, 143
- California: fluoxetine-first policy in, 244; limit setting in, 245; tobacco-control programs of, 103, 104, 110
- Canada: prescription drugs from, 32; universal insurance in, 39, 40
- Canadian Priority Setting Research Network, 243
- cancer centers, 217
- capitation payments, and outpatient care, 61
- cardiovascular conditions, and racial disparities, 139. *See also* coronary heart disease
- carve-outs: economic role of, 230; in mental health services, 234
- censure, 21
- Center for Quality Improvement and Patient Safety, 172
- Center for Studying Health System Change, 58
- Centers for Disease Control and Prevention (CDC), 92, 104
- Centers for Medicare and Medicaid Services (CMS), 190, 192, 194, 200, 201, 239, 246
- certificate-of-need (CON), 4, 61–63
- certification: specialty, 207; subspecialty, 209
- chains: ambulatory surgery centers, 57; and Medicare, 59; success of, 64–65
- childhood development programs, 125
- children: firearm death rates among, 86, 87; food advertising directed at, 109, 110
- chiropractors, 42
- Christian Coalition, 21
- chronically ill: and aging population, 192; and Medicare coverage, 190; policies for, 125–126
- cigarette manufacturers: compared with food manufacturers, 111; and tobacco lawsuits, 105
- cigarette smoking: banning, 79; deaths associated with, 99; and health

- disparities, 117; and Healthy People 2010, 128; incidence of, 100, 107; passive, 102; programs to reduce, 126
- civil rights law, U.S., 140, 143; Civil Rights Act (1964), 136, 142; federal oversight of, 137; and health care system, 144; innovations in, 142–143; and racial disparities, 141; and racial segregation, 136
- clinicians, vs. academics, 157
- Clinton, William J., 26, 29, 163
- Clinton administration: health plan of, 28; and health reform, 26, 30; and racial disparities, 144; and Title VI, 143
- COBRA, 50n. 6
- cognitive ability, and health, 76–77
- Committee on Costs of Medical Care, 38
- common good, 15
- Communitarians, 16
- community: legacy of, 15–16; and personal behavior, 18
- community trials, economic analysis of, 126
- computers: and clinical prediction, 159; and EBM, 158; patient records on, 172
- conflict-of-interest regulation, 4
- Congress, U.S.: cigarette ads banned by, 101; and firearms manufacturers, 92; and patient safety, 167, 168; and prescription drug benefits, 189; and specialty hospitals, 216, 217
- consolidations, in health care system, 55
- “consumer-driven health care” movement, 160
- consumerism movement, 137
- Consumer Product Safety Commission, 92
- consumers: and access to information, 214; minority, 138; and patient safety, 173; and primary care, 217; and quality of care, 216; and specialization, 212
- Conway, James, 163
- cooperation, in American tradition, 13–14
- coronary heart disease: community intervention for, 129; and socioeconomic status, 76
- cosmetic surgery, 213
- cost containment, politics and, 32–33
- cost controls: legislation for, 32; limits of, 31
- costs, health care: and insurance premiums, 40–41; mental health, 229; public concern regarding, 33
- Council of Medical Specialty Societies, 218
- credentials, specialty, 207–208
- crime: adolescent gun, 93; firearms and, 88; and gun lobby, 89
- culture, medical: and change, 168–174; physicians in, 170, 171; safety in, 169
- Current Population Surveys, 75
- Dana Farber Cancer Institute, 162, 163
- Davis, Gray, 21
- deaths: determinants of, 115; injury, 85; preventable, 75, 167–168, 171; smoking-related, 99
- deficits, federal budget, 34
- Democratic Party, and health care reform, 29–30, 33
- diagnosis-related groups (DRGs), 42, 224
- diagnostic facilities, 56
- diet, factors affecting, 80–81
- Dilbert* cartoon, 155
- disabilities, persons with: in health care system, 189; life expectancy for, 191; and Medicare, 190, 193; mobility of, 195–198; numbers of, 190–193; policies for, 125–126; quality of care for, 8, 201–202; and SSDI, 192; wheelchair-bound, 200–201
- disability: determination of, 198–199; insurance, 38
- disability programs, economics of, 232–233
- discharge codes, ICD–9, 167
- discrimination: in health care, 137; intentional, 137, 143
- disparate treatment, 137
- disparities, health, 115; causes of, 76; and civil rights law, 142; contextually based approaches to, 79–80; and fundamental cause theory, 72; and Healthy People 2010, 128; and HIV/AIDS drugs, 80; and job-based coverage, 44; lack of awareness of, 130; and law, 7; population-health perspective on, 77–78; reducing, 124–130; and socioeconomic status, 5, 73, 75–81, 115–130

- disparities, racial: and chronic illness, 139; data on, 144, 145; and health care quality, 143–144; and health insurance system, 138; and legal interventions, 141; reducing, 124–130, 141
- disparities, social, 118–121. *See also* socioeconomic status
- District of Columbia, cigarette tax in, 105
- doctors. *See* physicians
- drinking, public reaction to, 23. *See also* alcohol abuse
- drug abuse: disability because of, 199; and socioeconomic status, 117
- drug wars, 17, 24
- eating behavior, 108. *See also* obesity
- education: about cigarette smoking, 100–101; and culture of openness, 241; and health outcomes, 77; and obesity epidemic, 109; socioeconomic status inequalities and, 124; and smoking behavior, 102. *See also* nursing education
- elderly: disabilities among, 190; and Medicare coverage, 190; and prescription drug benefit, 29; and prescription drugs, 28; resources for, 81
- Elders, Jocelyn, 20
- election, presidential, 33, 34
- electronic medical record (EMR), 168
- emergency departments, minority dependence on, 139
- Emphysema Treatment Trial, 239, 246
- employer-based health insurance, 46; criticisms of, 46; in developing countries, 40; for families, 45–46; limitations of, 43–47; origins of, 37–40; rationale for, 40–41; in reformed system, 47; success of, 42; as unregulated market, 41
- employment: and levels of illness, 123; and mental health services, 233–234; and socioeconomic status inequalities, 124; and social insurance, 231
- England, National Health Service in, 214. *See also* United Kingdom
- environmental tobacco smoke (ETS), 102
- epidemiology, “risk-factor,” 71
- ERISA, 41
- errors, medical: apathy toward, 155–156; causes of, 162; changing perception of, 153; deaths from, 154; in dysfunctional health system, 174–175; and nurse staffing, 181; outpatient, 155; preventable, 153–154; reducing, 7; zero tolerance for, 155
- ethnic groups, 6; disability among, 191; and economic disparities, 116; and health disparities, 118–121; purchasing power of, 138
- ethnicity: and health disparities, 122–124; and medical care, 127
- Europe: public health campaigns in, 21; social insurance systems in, 39. *See also specific countries*
- evidence-based medicine (EBM) movement, 158
- examining table, costs of, 200
- excellence, medical: and changing perceptions, 153–154; concept, 152; diffusion of innovations for, 152–153; from innovation to practice, 154–157; and QI innovations, 159–160; and “town-gown” arguments, 157, 158
- excise tax, on bad foods, 110
- exercise, factors affecting, 80–81
- “experience rating,” 48
- Fairness Doctrine: and antismoking campaign, 101; and media, 106
- fast food, 22
- Fatality Analysis Reporting System, 91
- Federal Employees Health Benefits Program, 144, 225, 226
- federal grants, 216
- Federal Trade Commission, 159
- fee-for-service programs, and Medicare coverage, 200
- financing, health care: for mental health, 224; and minorities, 139; and racial disparities, 143; and role of government, 29, 32. *See also* employer-based health insurance; Medicaid; Medicare
- Finland, heart disease programs in, 129
- firearms, 85; creating regulatory agency for, 95–97; and crime, 88; distribution system for, 93; flechettes, 92–93; Glaser

- safety slugs, 92–93; grassroots support for, 95; manufacturers of, 92–93, 96; nubugun, 92; policy recommendations for, 91–94, 96–97; public health approach to, 90–91; safety policies for, 95; for self-defense, 89; and social costs, 89; suicide with, 86, 87
- Flexner report, 151–152, 160
- fluoridating water, 79
- Food and Drug Administration (FDA): expedited reviews of, 32; and medication errors, 173
- food industry: and Big Tobacco, 111; and public health, 109
- food labeling, 112
- food muckrakers, 22–23
- Foster, Mike, 21
- Foundation for Informed Medical Decision Making, 159
- Fox v. Health Net*, 238
- France, universal insurance in, 39, 40
- Friedman-Knowles Experimental Therapy Act (1998), 245
- fundamental-cause theory, 72, 74–75, 82
- gender: and health disparities, 115–117, 122–124; and health status indicators, 122; life expectancy and, 122; and preventive medical services, 117; and provider response, 118
- generics-first policy, 239
- genome, mapping human, 81
- Germany: job-based coverage in, 46, 49; nursing in, 185
- government: and mental health care delivery, 223; and racial disparities, 140; role in health care of, 29, 32, 33, 128
- Great Depression, 15
- Great Society, 19
- gun dealers, 96
- gun lobby, 89, 90–91, 94–95
- gun-making technology, 92
- gun owners, 93–94
- guns: childproofing, 92; and homicide, 85–86; misuse of, 5. *See also* firearms
- gynecology, 214
- handguns, 85
- harm reduction, in antismoking campaign, 107
- Harvard Injury Control Research Center, 91
- Harvard Medical Practice Study, 153
- Hatlie, Martin, 163
- Hawaii, job-based model of, 47
- HCA (Hospital Corporation of America), 166
- health: determinants of, 71, 115–118; of persons with disabilities, 191; social determinants of, 125; social disparities in, 4, 118–124, 129–130 (*see also* disparities, health); socioeconomic resources affecting, 74; strategies for improving, 77–82, 126–130, 141–145, 201–202; and the U.S. population, 115
- Health and Human Services (HHS), Dept. of, 102, 128, 144, 216
- Health and Retirement Survey, 77
- health care: cultural power of, 24; EBM-based information in, 158; market-oriented, 218; and moral politics, 23–24; need for limits in, 9; safe culture in, 169–171; safety in, 175; systems analysis approach in, 163. *See also* medical care
- Healthcare Equality and Accountability Act (2003), 145
- health care system, U.S.: expenditures of, 11; failure of, 189; inefficiencies in, 65; mental illness in, 224; profit opportunity in, 55; racial bias in, 135. *See also* hospitals; Medicaid; Medicare; nursing; physicians
- health clinics, school-based, 20–21
- health insurance: employer participation in, 37 (*see also* employer-based health insurance); integrating mental health into, 231; offered by voluntary organizations, 38, 41; premiums, 9; racial disparities in, 138. *See also* insurance coverage; Medicaid; Medicare
- Health Partners in Minnesota, 246
- health plans: and market segmentation, 4; performance measurement of, 234
- health policy, 27, 138; and certificate-of-need, 62; and disability, 198–202; and

- health policy (*continued*)  
 firearms, 91–97; and health disparities, 77–82, 124–129; and interest groups, 30; and limit setting, 247; and mental health services, 234; and moral politics, 16–24; and obesity, 108–113; and patient safety, 174–175; and racial disparities, 141–145; shaping of, 2, 3, 10, 32–34; and smoking, 101; social context of, 2–5; social context of, 2–5; and specialization, 215–218
- HealthSouth, 57
- Healthy People 2010, 124, 126, 127, 128, 129, 130
- high reliability organizations (HROs), 168–169
- Hill Burton Act (1946), 136
- HIPAA, 50n. 6
- hip fractures, 194
- Hispanics: immigrants, 121; mortality of, 119
- HMOs (health maintenance organizations): and health care legislation, 33; and mental health services, 229; profits of, 213. *See also* managed care
- homicides: guns and, 85–86; male vs. female, 88
- hospice care, 178
- hospitals: accountability in, 169; cardiac, 59; magnet, 184–185; with M-form organization, 60; nurse staffing in, 178; and nursing education, 183; and nursing knowledge, 184; orthopedic surgery, 59; profits of, 213; restructuring of, 182; safe practices in, 165; safety agenda for, 169, 170; and Section 507, 216, 217; as self-interested competitors, 218
- hospitals, general, 56; protection of, 62–63; regulation and, 61
- hospitals, specialty, 4, 56, 64; competition from, 216, 218; and market diversification, 57–59; ownership of, 58; physician-owned, 216
- Hospital Survey and Construction Act (1946), 136
- housing, and socioeconomic status inequalities, 124
- Human Genome Project, 81
- ideology: and health policy, 2–3; and health reform, 29
- immigrant groups: Hispanic, 121; Latino, 121; socioeconomic status characteristics of, 119–121
- incentives, and health quality, 144
- income: and health outcomes, 77; and life expectancy, 75, 122; and mortality, 125; and socioeconomic status inequalities, 124. *See also* socioeconomic status
- independent practice organizations (IPOs), 245
- Indianapolis, Ind., specialty hospitals in, 58
- individualism, in American culture, 14–15
- infant mortality rates, race and, 123
- infections, hospital caused, 155
- information: access to standard, 214; dissemination of, 80; EBM-based, 158; standardization of, 168
- information technology, funding for, 168
- innovations: diffusion of, 152–153, 163; and health care marketplace, 215
- Institute for Healthcare Improvement, 154, 173
- Institute of Medicine (IOM), 7, 104, 151, 152, 168; Committee on National Agenda for Prevention of Disabilities of, 194; on medical errors, 162; on nurse staffing, 181
- Institute of Medicine (IOM) reports, 152, 153, 154, 155, 156, 157, 162, 167, 186; impact of, 163–167; nursing in, 186; proposals of, 172–174
- insurance coverage, 37; decision making in, 242; differential, 9; employer-based system, 3; growth in, 38; legislation reforming, 141; for mental disorders, 223–224; and political pressures, 33; and public opinion, 27–28; and tax subsidies, 39; universal, 3. *See also* employer-based health insurance; Medicaid; Medicare
- insurance markets, adverse selection in, 40, 41
- insurance programs, public, 216. *See also* Medicaid; Medicare

- integrated delivery systems (IDS):  
 diversification across markets in, 56–59; diversification of services in, 54–55; economies of scope in, 54–55; organizational hybrids in, 59–61
- intelligence, and health, 76–77
- interest groups, 13, 213, 238; power of, 30, 71; public, 30 (*see also* special interests)
- Internal Revenue Service (IRS), 38
- Internet, 159, 212
- interventions, health care: contextually based, 79; dissemination of, 80–81; individually based, 78
- Investigator Awards, 10, 104, 151
- Jayne, David, 196–197
- job-based coverage. *See* employer-based health insurance
- job lock, 46
- Johnson administration, 19
- Joint Commission on Accreditation of Healthcare Organizations (JCAHO), 163, 165, 168, 171, 173, 174
- joint ventures, physician, 59
- Jones, Sally Ann, 202
- junk food, 108
- Kaiser Foundation, 130
- Kaiser Permanente, 239, 244, 245, 246
- King, Martin Luther Jr., 23
- Kizer, Kenneth, 163, 164
- labor market, health insurance and, 46
- labor unions, 43
- Latinos: in health care system, 139; immigrants, 121
- lead paint, 79
- Leapfrog Group, 154, 166, 173
- learning, organizational, 169
- legislation, health care: and interest groups, 30; and medical errors, 154; and racial progress, 136; reforming insurance coverage, 141
- legitimacy: of limit setting, 238–239; stakeholder perceptions of, 242
- Lehman, Betsy, 153, 154, 162
- licensed practical nurses (LPNs), 181. *See also* nurses
- licensing: of motor vehicles, 96; of registered nurses, 182
- life expectancy: and elderly population, 191; and gender, 122, 123; income and, 75; and race, 122; of U.S. population, 115
- lifestyle, 138
- limited English proficiency (LEP), 143
- limit setting: accountability for reasonableness in, 240–243; and fairness problems, 239–240; legitimacy of, 238–239; for pharmacy benefits, 242–245
- Locke, John, 17
- lung cancer: and cigarette smoking, 102; and socioeconomic status, 76
- Luther-Midelfort Hospital, 166
- Madison, James, 14
- Maine, tobacco-control program of, 104
- malpractice suits, and safety programs, 174
- managed care, 3, 31; and adverse selection, 40–41, 226, 228; backlash against, 9; carve-outs in, 230; “gatekeepers” in, 207; Medicaid, 140–141; Medicare, 33, 200; and minorities, 140; and parity for mental health services, 227–228; private sector during, 53; rationing within, 234; risk adjustment in, 230
- markets: and clinical medicine, 214; and diversification, 53, 54, 55, 56, 64–65; employer-based plans in, 42; flexibility in, 4; and hospitals, 58, 61, 63; imperfect competitive conditions of, 31; and mental health delivery, 223; and physician incomes, 215; and primary care, 140; private plans in, 43; and racial discrimination, 137; and specialization, 213
- Massachusetts: Medicaid drug limits in, 243–244; Medicaid program in, 244–245; tobacco-control program of, 103
- Massachusetts Psychiatric Society (MPS), 244
- Master Settlement Agreement (MSA), 104, 105–106
- Mather, Cotton, 157
- MD degree, 207–208

- meat, inspecting, 79
- meatpacking industry, 22
- MedCath, 58
- media: on medical errors, 163; medical mistakes in, 153; preventable deaths in, 167
- media campaigns: anti-tobacco, 106; for healthy eating behaviors, 110–111
- Medicaid: design of, 202; drug limits of, 243–244; expansion of, 141; limit setting in, 238; and minority patients, 140, 142; and nondiscrimination, 143; reimbursement levels of, 79; reliance of minorities on, 138, 140; specialization subsidized by, 206
- medical care: improving, 127; limiting access to, 238; and racial disparities, 138. *See also* health care
- Medical Expenditure Panel Survey, 225
- medical necessity, 193–195
- medical records: automated, 216; computerized, 172, 214
- medical science, 14–15
- Medicare, 3, 4, 28; amyotrophic lateral sclerosis coverage, 196–197; and budget politics, 31; catastrophic legislation for, 31, 32; coverage decisions of, 246–247; evaluation and management codes of, 200, 201; expansion of, 141; guiding mandate of, 189; homebound in, 196; home care in, 196; and home health chains, 59; impact on quality of life of, 199–200, 202; limited coverage provided by, 189–190; limit setting in, 239; medical necessity under, 193–195; mental health users in, 229; and minority patients, 142; and mobility aids, 197; and nondiscrimination, 143; office visits coverage, 200–201; and outpatient procedures, 56; paradoxical policies of, 195–197; for persons with disabilities, 193; and physician reimbursement, 200–201; prescription drug benefit of, 26, 29, 32, 33, 63; and quality improvement, 159; reform of, 34, 216; restructuring of, 26; and single-specialty practice, 213; and specialization, 207; specialization subsidized by, 206; and specialty hospitals (Section 507), 216, 217; and SSDI, 192; total expenditures of, 201; variations in spending of, 157
- Medicare Coverage Advisory Commission, 246
- Medicare Payment Advisory Commission (MedPAC), 213, 217
- Medicare Prescription Drug, Improvement, and Modernization Act (2003), 159, 216. *See also* prescription drugs
- medicine: evidence-based, 157–158; organized, 208–209; racial bias in, 135; specialization movement in, 211
- men: and economic disparities, 116. *See also* gender
- mental disorders, costs of, 223
- mental health, 8–9; adverse selection in, 226, 228, 230, 231, 234; and disability, 199; and employment policies, 233–234
- Mental Health Parity Act (1998), 225
- mental health services: parity for, 225–226; rationing of, 229–230, 231
- Merck-Medco, 242–243
- M-form health care organizations, 59–61
- Michigan: limit setting in, 244–245; Medicaid drug limits in, 243
- minimum-age-of-purchase laws, 108
- Minnesota, antismoking legislation in, 102
- minority populations: and access to medical care, 118; and disparate impact, 137; in health care system, 135–136, 139; and health disparities, 116; life expectancy for, 122; and Medicaid, 140–141; substance abuse of, 117. *See also* African Americans; American Indians; Hispanics; immigrant groups; Latinos; women
- mistakes, medical: denial of, 158; preventable, 151. *See also* errors, medical; patient safety
- mobility aids, Medicare requirements for, 197
- monopoly power, in hospital sector, 63
- Montgomery Ward, 38
- morality: in American politics, 14; and health policy, 2–3

- morality politics, 16–17, 24; in action, 20–23; and fear, 24; obesity in, 22–23; of Puritans, 17; social gospel, 18–20
- morbidity, fundamental causes of, 74
- mortality: fundamental causes of, 74; income and, 125; and magnet hospitals, 184–185; and nurse staffing, 180–181, 182, 183; nursing and, 182; occupation and, 75–76; racial differences in, 118, 119; and socioeconomic status, 73; smoking-related, 103; and Social Security, 81. *See also* deaths
- motor vehicle injuries, reduction in, 90
- Moving to Opportunity Program, HUD's, 81–82, 124
- MRI (magnetic resonance imaging) facilities, 59
- Multiple Risk Factor Intervention Trial (MRFIT), 126
- National Academy of Social Insurance, 193, 195
- National Cancer Institute (NCI), 104
- National Committee for Quality Assurance, 173
- National Comorbidity Survey, 233
- National Death Index, 75
- National Emphysema Treatment Trial (NETT), 239, 246
- national health insurance, 40, 168, 174. *See also* universal health insurance
- National Heart, Lung, and Blood Institute, 246
- National Highway Traffic Safety Administration (NHTSA), 96
- National Institutes of Health (NIH), 32, 167
- Nationality Quality Forum, 165
- National Longitudinal Mortality Study, 75
- National Patient Safety Foundation (NPSF), 153, 163, 165
- National Quality Forum (NQF), 164, 165, 169, 173
- National Survey of American Families, 232
- Native Americans. *See* American Indians
- Native Hawaiians, 121
- negligence, and safety programs, 174
- neo-Puritans, 18, 23
- the Netherlands: health goals of, 128; health insurance markets in, 49n. 2; school health promotion programs in, 126
- New Deal, 19
- New Jersey, cigarette tax in, 105
- New York City, cigarette tax in, 105
- niche industries, 213
- nicotine addiction, 107
- Nixon, Richard, 198
- nonsmokers' rights movement, 102
- NRA (National Rifle Association), 95
- nurse-patient relationships, 186
- nurses: attitudes toward, 178; burnout of, 177, 184; decline in numbers of, 180; and medical errors, 172; understaffing of, 177
- nurses' aides, 181. *See also* nurses
- nursing: and adequate staffing, 178–181; practice, 177; and quality improvement, 185–186; and quality of care, 177–178; role of, 8
- nursing education, 182–183; associate degree programs, 182; baccalaureate programs, 182; diploma programs, 182
- nursing homes: and Medicare, 59; minorities in, 139
- obesity: epidemic of, 3, 6; incidence, 22; national attack on, 110; public reaction to, 23; rising numbers for, 192
- obesity-control movement, 112
- obesity epidemic: and clean indoor air movement, 112; compared with tobacco epidemic, 108–110, 111–112
- occupation, and mortality, 75–76. *See also* socioeconomic status
- O'Leary, Dennis, 163
- oncology, 214
- ophthalmologists, 211
- Oregon, tobacco-control program of, 104
- organizational hybrids, 59
- organ transplantation teams, 215
- orthopedic groups, 215
- osteopathic physicians, 210
- otolaryngologists, 211, 215
- outcomes, health: and committed sponsorship, 139; nurse staffing and, 180–181,

- outcomes, health: (*continued*)  
 182, 183; and nursing education, 182;  
 and nursing skills, 181–183; for persons  
 with disabilities, 192; and racial  
 disparities, 138; and socioeconomic  
 status, 74, 76, 77, 116–124; and  
 variations in spending, 157
- outpatient procedures: prevalence of, 56;  
 surgery, 43. *See also* ambulatory  
 surgery
- PacifiCare, 246
- parental notification, 21
- parity: in managing health care, 227–228;  
 for mental health services, 225–230
- patient care: racial data for, 142; rationaliz-  
 ing, 157
- patient-centered care, 201
- patient dumping, 60
- patient records, computerized, 172, 214
- patients: as consumers, 166; and insurers’  
 behavior, 3–4; profitable vs. unprofit-  
 able, 62; surgical, 179–180
- patient safety: AHRQ’s research initiative  
 on, 172; barriers to, 171; congressional  
 action on, 167, 168; and new practices,  
 166; and NQF, 164–165; nurses’  
 functions associated with, 178; and  
 nurse staffing, 180–181, 182, 183; and  
 overuse, 157; professional meetings on,  
 155; promotion of, 163; research on,  
 167; and role of nursing, 185; tipping  
 point for, 155, 158; and underuse, 157
- patient safety movement, 153, 156
- payment systems: chaos of, 65; and safe  
 practices, 174; and specialty hospitals,  
 59; supply-side, 227
- pediatrics, 214
- Personal Responsibility and Work  
 Opportunity Reconciliation Act (1997),  
 20
- personnel, regulation of health, 208
- pharmaceutical revolution, 43
- pharmacists, and medical errors, 172
- physician-owned facilities, bans on  
 referrals to, 61, 63–64
- physician-patient relationship, and health  
 quality, 144
- physician practice management (PPM)  
 firms, 54–56
- physician practice organizations (PPOs),  
 245
- physicians: different roles of, 65; failure  
 rates for, 157; and gun ownership, 94;  
 incomes of, 215; and insurers’ behavior,  
 3–4; nurses’ relationships with, 178;  
 osteopathic, 210; performance of, 157;  
 production system for, 207; and safety  
 movement, 171; as self-interested  
 competitors, 218; specialty, 56
- physicians, primary care, 214; and market  
 diversification, 56; shortage of, 127
- physician services, Medicare-paid, 201
- Physicians’ Working Group for Single-  
 Payer National Health Insurance, 174
- Pittsburgh Regional Healthcare Initiative,  
 154–155
- planning, health, 140
- plastic surgeons, 215
- political parties: and health reform, 29. *See  
 also* Democratic Party; Republican  
 Party
- politics: budget, 31–32; and firearm issues,  
 88–89; and health care, 13; of health  
 reform, 26–28, 32–34; morality, 16–23;  
 and patient safety, 167–168
- politics, American: community in, 15–16;  
 individualism in, 14–15; reforming  
 tradition in, 24
- population: elderly, 190–193; resource-  
 poor, 81–82
- population health, 2; promoting, 4–7; and  
 socioeconomic status disadvantage, 124
- poverty: and eating behavior, 109; and  
 socioeconomic status inequalities, 124
- power-operated vehicle (POV), 197–198
- practice, medical: and health disparities,  
 116–117; variation in, 156
- Premier, Inc., 155, 166
- prescription drug benefit: gaps in, 31–32;  
 support for, 29
- prescription drugs: from Canada, 32; and  
 fairness problems, 239; Medicaid’s,  
 243–244; and Medicare, 28; weighing  
 benefits for, 242–245. *See also*  
 psychiatric drugs

- price controls, 38, 39
- primary care: and consumers, 217; and specialization, 212
- professions, health care: autonomy of, 175; minorities in, 127
- prohibition, national, 17, 19
- protective factors, contextualizing, 80
- providers, health care: demonizing, 22; and employer-based plans, 42; and information, 159; safety net, 141
- psychiatric drugs: generics-first policy for, 239; and Medicaid coverage, 238, 243–245
- Psychopharmacology Work Group, 243
- psychotherapy: coverage for, 223; and managed care, 227
- public awareness, of decision making policies, 246–247
- public concern, and health care reform, 33
- public health: European campaigns, 21; and firearm injury control, 90–91; and obesity epidemic, 109; overcoming barriers in, 129–130; and tobacco-control programs, 107–108
- public health sins, 17
- public interest, 54, 211, 218
- public opinion: and gun ownership, 93–95; and health care reform, 26, 27–29; and health disparities, 130; and nonsmokers' rights movement, 103; and patient safety, 167; on prescription drugs, 28
- public policy, race in, 138. *See also* politics
- Puritans, 16, 17–18
- quality, health care, 1, 2, 7–8, 10, 151–152; and costs, 38, 42; and disparities, 118, 127, 130, 142–145; ensuring, 159, 201–202; and hospitals, 166–167; lack of sensitivity to, 47; law of, 143–145; and organization of delivery system, 53, 64, 171; overuse and patient safety, 157; and reform, 27; role of nurses in, 177–178 (*see also* nurses; patient care); and specialization, 206, 209, 210, 214, 218. *See also* patient safety; safe practices; safety
- quality improvement (QI), 2, 7–8, 152, 155, 215; ethos, 151; implementation of innovations for, 160; information and, 47, 159, 168, 216; measures, 46; nursing and, 185–186
- quality movement, 216
- Quality of Health Care in America, IOM's Committee on, 153–154
- quality of life, 9, 117, 126, 194, 196, 202
- race: and health care system, 145; and health disparities, 122–124; Healthy People 2010 and, 128; and infant mortality rates, 123; and medical care, 127
- racial groups, 6; disability among, 191; and economic disparities, 116; and health disparities, 118–121; and insurance coverage, 117; purchasing power of, 138. *See also* minority populations
- rationing: of Medicare resources, 195; of mental health services, 229–230, 231
- Reagan, Ronald, 19, 23
- Reagan administration, 19, 225
- redistribution, problems of, 45
- reform, health care, 3, 26; and budget constraints, 31; definitions for, 27; and electoral politics, 34; employer-sponsored insurance in, 47–49; and interest groups, 30; major efforts, 31; patient care in, 153; phases of, 27; and public concerns, 33; and racial disparities, 141
- reforming tradition, 24
- registered nurses (RNs), 181. *See also* nurses
- regulation: CON statutes, 61–63; of firearms, 85; and health quality, 144; and managed care, 234; of medical specialists, 206; and patient safety, 168; pyramiding of, 63; and referrals to physician-owned facilities, 63–64; underdeveloped potential of, 245
- reimbursement, 4; Medicare decisions for, 193–194; for physician services under Medicare, 201; and quality indicators, 159. *See also* Medicaid; Medicare; payment systems
- relative value scales, resource-based, 42

- relevance, and limit setting, 240–242
- religious revivals, 16
- rental assistance programs, 125
- Republican Party, and health care reform, 28, 29, 30, 31–32, 33
- resources: and fundamental-cause theory, 75; and health disparities, 116–117
- revisability, and limit setting, 240–242
- risk adjustment, 201; in managed care, 230; in mental health services, 234
- risk factors, 5; behavioral, 126–127; contextualizing, 80
- Robert Wood Johnson Foundation, 10, 104, 151
- Roosevelt, Franklin D., 15, 19, 23
- Rostenkowski, Dan, 31
- safe practices: in hospitals, 165; NQF-endorsed, 164
- safety: achieving, 163; culture of, 168; and financial incentives, 170; hospital, 169, 170. *See also* patient safety
- safety coalitions, 166
- safety net, 140, 141, 202
- Sandoval* decision, 137, 142, 143, 144–145
- Satcher, David, 22
- satisfaction, and variations in spending, 157
- schools, health clinics in, 20
- screening, health, 79
- seatbelts, 79
- Second Amendment, 94
- Section 507, of Medicare law, 216, 217
- segregation, residential, 140. *See also* disparities, racial
- SES gradient, and health disparities, 82
- sexually transmitted diseases, 17
- Sinclair, Upton, 22
- single-payer approach, 3. *See also* national health insurance
- smokers, addictive behavior of, 100. *See also* cigarette smoking
- smoking: health effects of, 22; prevention, 6; public reaction to, 23
- smoking cessation programs, 112, 126, 129
- smoking prevention, 6
- snack taxes, 110
- social gospel, 17, 18–20, 24
- social insurance programs, 225; in Europe, 39; integration in, 231
- Social Security, 15, 19; impact of, 81; and public health solutions, 24
- Social Security Disability Insurance (SSDI), 192; and Medicare coverage, 198; and mental disorders, 224, 231–232; and mental health services, 233; waiting period for, 199
- socioeconomic status (SES): and behavioral risk factors, 126–127; effects of health on, 125–126; and fundamental causes, 72; and health disparities, 115–117, 122–124; and health outcomes, 5; mortality and, 73; and patient care, 139; and racial disparities, 138
- special interests, in U.S. politics, 95. *See also* interest groups
- specialists: primary care roles of, 212; production of, 209–210
- specialization: credentials for, 207–208; downside of, 206; and quality of care, 206–209, 210, 214, 216, 218; in U.S. medicine, 206–209
- specialties: cooperation across, 214–215; national credentialing for, 215; organized, 208–209; origins of, 211–212; problems with, 212–213; standards for credentialing, 209; and strategic planning, 217
- specialty boards, ABMS-approved, 215
- specialty facilities, and CON statutes, 62. *See also* hospitals, specialty
- specialty niche, 217
- specialty organizations, 208–209
- specialty societies, and patient safety, 173
- sports medicine, 212
- Stark regulations, 4, 63–64
- Starr, Paul, 16
- states: cigarette tax in, 105; and limit-setting policies, 245; and Medicaid's safety net, 202; mental health agencies of, 223; and specialty boards, 215; tobacco-control programs of, 103, 104; “tort crisis” in, 213; training of physicians funded by, 216. *See also specific states*

- Steinfeld, Jesse, 102  
 stereotypes, negative, 127  
 stress: and health disparities, 116–117; of hierarchical position, 75–76  
 students, changing diets of, 112  
 subspecialties, 208, 209, 214  
 substance abuse: and health disparities, 116–117; identification of, 8–9  
 suicide: adolescent, 94; guns and, 86, 87; among women, 87–88  
 Supplemental Security Income (SSI), 199; and mental disorders, 231–232; and mental health services, 233; and mental illness, 224  
 Supreme Court, U.S.: on Second Amendment, 94; on training funds, 144  
 surgeon general's report: 1964, 101; 1972, 102; 1999, 223  
 surgery: ambulatory, 56–57, 64, 213, 218; cosmetic, 213; outpatient, 43; “wrong site,” 154  
 Surgical Health Corp., 57  
 Survey of Income and Program Participation, 233  
 survival rates, and committed sponsorship, 139  
 sustainable growth rate (SGR), and Medicare coverage, 201  
 Sutter Health system, 57  
 systems theory, application of, 163
- tax: cigarette, 105, 110; redistributive health, 49; snack, 110  
 tax code, 38  
 tax credits, for nongroup coverage, 48, 49  
 tax exemption, for employer payments, 46  
 tax subsidies, 216  
 technological innovations: and insurance markets, 43; and limit setting, 241; and outpatient care, 61  
 teenagers, health problems of, 20–21. *See also* adolescents  
 temperance crusaders, 17  
 Temporary Assistance for Needy Families (TANF): and mental disorders, 224, 231–232; and mental health services, 233  
 tipping point, on patient safety, 155, 158
- Title VI of Civil Rights Act, 140, 142; early days of, 143; provisions of, 136–137  
*T. J. Hooper* case, *The*, 142, 145  
 tobacco abuse, and public health, 107–108  
 tobacco-control programs, state, 103  
 tobacco industry, 22, 106  
 tobacco policy: antismoking campaign, 100–106; and costs of smoking, 99–100; lawsuits and, 105; media campaigns, 106; research and, 113  
 Tocqueville, Alexis de, 14, 16  
 Todd, James, 163  
 “town-gown” arguments, 157, 158  
 training, and specialty boards, 209  
 traumatic brain injury (TBI), 85  
 “trialability,” 154
- U-form health care organizations, 59–60  
 uncertainty, 1, 157, 240  
 unemployment, and health disparities, 116. *See also* employment  
 uninsured, the, 3; expanded coverage for, 33; low-wage workers among, 26  
 United Kingdom (UK): Acheson report, 125; job-based coverage in, 49; nursing education in, 182; universal insurance in, 39–40  
 United States, national health goals of, 124. *See also* Healthy People 2010  
 universal health insurance, 3; and Clinton administration, 29; countries with, 39; job-based coverage in, 47, 48; and poorer communities, 141  
 utilization, and variations in spending, 157  
 utilization review, 103
- vaccinations, 79  
 Veterans Health Administration, 155, 163, 166  
 victimization surveys, 85, 89  
 violence: firearm, 97; gun, 90, 95; lethal, 85, 86
- warning labels, 79; on cigarette packs, 101, 126; success of, 107–108  
 welfare reform: and abstinence education, 20; and mental health services, 233

- Whitehall study, 75–76
- whites: life expectancy for, 121, 122;  
mortality of, 119; substance abuse of,  
117
- window guards, 79
- Wisconsin, Medical College of, 91
- Wisconsin Longitudinal Study, 77
- women: and economic disparities, 116;  
firearm deaths among, 87–88; smoking  
among, 102. *See also* gender
- women's health centers, 59
- work conditions: and health disparities,  
116; information-age, 109
- World Health Organization (WHO), 128
- youth, firearm deaths among, 86–87