



**For Immediate Release**

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## **Nation's Health Experts Urge Federal Policy Changes To Help U.S. Meet Pandemic and Long-Term Critical Care Needs**

**December 8, 2009** – At a briefing this morning with Congressional and Executive Branch aides, leaders from the Roundtable on U.S. Critical Care Policy shared their recommendations for steps that federal policymakers should take to ensure that our critical care infrastructure is equipped to meet the nation's pandemic and longer-term health care needs.

These five consensus recommendations, contained in a newly-released report entitled *Ensuring that Critical Care Can Meet America's Pandemic and Long-Term Needs: Consensus Recommendations for Federal Policy Action*, reflect the views of experts from across a wide array of medical and policy specialties who met for the first time as a group in Washington, DC this October to assess the nation's most pressing critical care policy challenges. Today, the group released its guidance. It urges Congress and the Administration to advance several changes needed to enhance the nation's critical care delivery system and to ensure the country is able to meet its critical care challenges, including those posed by the prospect of a healthcare pandemic such as H1N1.

Roundtable chair Dr. Jeffrey Grossman, a critical care pulmonologist and Chief Executive of the University of Wisconsin Medical Foundation, warned: "With the immediate prospect of pandemic, the possibility of a national health emergency looming, and the very real long-term needs of the U.S. population at large, the time to bolster our ability to deliver quality critical care is now. We urge practitioners, patients, advocates and policymakers to come together to advance policies that will make a real difference in our ability to respond to these pressing systemic needs."

In the consensus report, experts specifically urged the adoption of five policy priorities -- namely, that:

- **The Obama Administration establish a national database** to track availability of critical care personnel and technologies in a real-time, available-on-demand basis for every ICU in the country, to enable rapid response to pandemic and other 'surge' needs on the system;
- Congress and the Executive Branch restructure reimbursement to more broadly enable physicians and caregivers to **conduct important and often cost-saving end-of-life planning** with patients and families;
- A widely adopted, **national "standard of crisis care"** be established to provide guidelines for critical care practitioners that will help them triage scarce resources in ways that provide the most benefit to the largest number of patients;

- Congress create clear and meaningful **incentives to join the critical care workforce**, where demand for qualified providers continues to outstrip supply; and
- **Therapeutic research for critical care be more robustly supported** through a national critical care trials and comparative effectiveness network. While such networks exist for other areas of medicine, one does not yet exist for critical care therapies.

Grossman and the other experts who joined together to produce the recommendations represent the major medical specialty groups providing critical care and support in hospitals and other facilities across the country, as well as other large health policy and advocacy organizations representing patients and providers.

For a full copy of the report and the delegates to the Roundtable, or more information about the Roundtable on U.S. Critical Care Policy, go to [www.CriticalCareRoundtable.org](http://www.CriticalCareRoundtable.org).

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