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Maintaining personal choice and autonomy

- 1 WHEREAS fear of dependence is of paramount concern to today's older persons, especially the fear of professionals exerting excessive control over their lives;
- 2 WHEREAS seniors are often unaware of or unable to access physicians and other health care providers who accept Medicare or Medicaid assignment, thus limiting their choice of provider;
- 3 WHEREAS chiropractic, acupuncture, traditional American Indian medicine, and other alternative health care services may be desirable and effective options to usual medicine;
- 4 WHEREAS all ethnic groups are not adequately represented in the pool of health care providers and, therefore, a patient's options are limited when attempting to choose a provider from like cultural background;
- 5 WHEREAS financial, informational, and other barriers severely limit the options of households that include an older member with a health- or disability-related problem; and
- 6 WHEREAS assistive technology and personal assistance services promote independence, increase quality of life, and lower the cost of care by reducing risks of secondary conditions;

THEREFORE, BE IT RESOLVED by the 1995 White House Conference on Aging to support policies that:

- 7 Integrate and promote consumer-centered values, such as choice, dignity, autonomy, the right to make informed decisions and take informed-risks, and the ability to maintain continuity of desired lifestyles throughout all aspects of physical and mental health and long-term care services;
- 8 Protect the individual's right to access and to choose one's own health care provider, to make other care plan decisions, and to direct one's own services;
- 9 Mandate the dissemination of information regarding all health care providers who accept Medicare and Medicaid assignment, as well as information on quality outcomes of their services;
- 10 Expand efforts to attract cultural and ethnic minorities into the system as health care providers;

- 11 Recognize the role of safe and effective alternative health care methods and promote their inclusion in Medicaid, Medicare, Veterans Affairs, and private health insurance benefits, to enhance patient participation in care-planning;
- 12 Develop and support policies that provide assistive devices, home modifications, and personal assistance services through Medicare and Medicaid to better enable older and disabled Americans to remain at home and/or to age in place.

