

Task force says Utah is off to a good start on reforming health care

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Utahns statewide formally accepted President-elect Barack Obama's invitation to help reform the country's health care system from the grass roots by attending six town hall meeting-type discussions earlier this month.

Those attending advised Obama not to overlook Utah as for a model for how to ensure quality and value, which place Utah from 10th to 3rd best in the country, depending on the survey. They believe Utah's approach in its own reform is worth looking as a possible template for the country — or at least well worth considering.

The two-hour discussion was held from Logan to St. George and arranged by the Utah Health Policy Project UHPP, which held similar meetings this fall to generate solutions to the access, delivery and quality of medical care in Utah.

For the state system to actually be new and improved one day, it must be private market driven, consumer-based, oriented more toward keeping people healthy and less inclined toward expensive, critical care procedures. It will also be bipartisan, not to mention financially sustainable, which several asserted the current system by any measure is not.

Most said they believe the health-care system in Utah and across the country is broken down and beyond repair, and that they don't understand why the most expensive health-care system in the world isn't better. They were less certain about what exactly to do about it.

Ironically, those who have spent the most time the past year assessing the Utah system aren't nearly as pessimistic.

"I'm actually hopeful because we're starting to take the first steps toward meaningful, comprehensive reform," said Rep. David Clark, R-Santa Clara and co-chairman of a special legislative task force. "It's been a long way already, and still have a long way and years to go. But Utah is off to a good start and at the head of the pack compared to other states."

Clark and others hope Utah will maintain that lead and stay well ahead of federal government proposals that are certainly in the offing but they hope are at least two years away.

"We realize that every state is different and that federal mandates and changes we will want to make will cross paths with federal law or oversight, and will have to be worked out," he said. He said reform can be viable and comprehensive if the effort remains truly bipartisan with an eye toward consensus more than mandate.

"The fact is that we won't be able to accomplish what we'd like to without involvement and approval of the federal government," he said. "It's also a fact that the best system for Utah is one built by Utahns who know its strengths and weaknesses and act accordingly."

"Plans for weathering the recession are at the top of the priority list, but health care figures into nearly every aspect of the economy, whether good or bad," said Judi Hilman, executive director of the UHPP, which organized the public meetings. The health policy research and advocacy group sponsored another in a series of meetings at six different sites statewide this past fall.

Obama, who is the first president since Truman to take on health-care reform as an administrative must-do, has said that health care is an economic problem in and of itself that is also factoring into the general economic meltdown and must be part of any lasting economic recovery.

Utahns can respond to the reform effort through UHPP, which will forward suggestions to the new administration. Last week's meetings were more about laying out what is broken and less about what should be done about it.

For example:

- Health insurance premiums have doubled in the past eight years, and co-pays for care and deductibles imposed by insurance carriers are limiting access to health care.
- Large medical bills contributed to half of bankruptcies and mortgage loan foreclosures.
- Just two out of 10 people working in health care are actually delivering health care.
- Medical errors result in as many as 100,000 deaths per year in U.S. hospitals.
- In the United States, \$412 per capita is spent on health-care administration and insurance — nearly six times as much as other developed countries.
- Anyone who wants to send comments regarding health-care reform can visit utahhealthpolicyproject.org.