

Questions raised about costs, access

BY PATRICE ST. GERMAIN • THE SPECTRUM • JULY 6, 2009

St. George - Health care reform on state and federal levels is moving forward, but as the government continues to work on a plan to provide affordable health care for all citizens, questions are being raised about costs, access and personal responsibility.

Judi Hilman, executive director of the Utah Health Policy Project, said state efforts for health care reform under the leadership of House Speaker David Clark, R-Santa Clara, have some exciting initiatives but have yet to identify the goal of health system reform.

"I don't see that the goal covers all of the uninsured," she said. "Without goals like that you can do exciting things but can't undertake health care reform."

In order for the reforms to work, Hilman said the state needs federal resources and there also needs to be some change in the laws dealing with benefits in the workplace and employer costs, and federal guidelines are needed.

Some of the reforms in the state include the recent open enrollment to the Primary Care Network. Utahns without health insurance were able to sign up for the state insurance which provides primary care but doesn't cover recommended procedures such as colonoscopies and mammograms.

Hilman said that PCN needs to be replaced at a national level and the other problem with PCN is that it creates the illusion of coverage.

Federal health care reform is happening really fast, Hilman said, with two bills on the drawing board with a hopeful signing date by October 15, but not without some problems.

"First starting out, national reform is going to be messy," Hilman said. "In order to maximize cost containment incentives have to be realigned and all that has to happen in order to bring everyone in."

Up front, there will be horrendous costs with an estimated price tag of \$1.6 trillion.

In the past several weeks, President Obama has twice recognized Intermountain Healthcare as a role model in delivery high-quality care for costs that are far below the national average.

Chris Coons Vice-president of the southwest region for Intermountain Healthcare said health care comes down to four basic components - cost, quality, service and access.

Having worked in health care for 28 years, and a former chairman of the Utah Hospital Association and active in the American Hospital Association, Coons said he has thought about his experience and what has worked in Utah.

"We need to balance all that in how we approach health care reform nationally as a state," Coons said.

Starting with cost, Coons said the cost per unit is down but when people see the bill, it looks as health care costs have gone up.

Coons said when you take into account inflation; the costs have gone down while utilization has gone up.

More tests and x-rays are used now as well as an increase in pharmaceuticals which improve longevity and the quality of life.

The number of patients over 65 and on Medicare across the county is growing, Coons said, and with technology and utilization up, hospitals are seeing increasing costs.

Quality is another major building block to health care quality in what the hospital does in its company and with its partnerships.

By increasing quality and best health care practices and having set guidelines, infections and re-admissions can be kept down and costs as well.

"We need to only remember to focus on best practice," he said.

Service is important as health care is the most personal service you will receive in your life, Coons said.

"I hope with health care reform, kindness and compassion as well as financial statistics will be looked at," Coons said. "Not all people can be cured so end of life and hospice needs to be done well. Pain is not an option."

Access is also important for those to access care and coverage.

Coons said with the state and federal governments looking at health care reform, federal coverage is such a huge component.

Medicare, Coons said, doesn't pay as much to Utah hospitals for the same procedure in California, although the quality and outcomes may not be as good.

"National health care reform needs transparency in costs, quality and outcomes," he said.

In order to make health care reform work, and be affordable for everyone will take time and money.

Issues such as personal responsibility and wellness initiatives will need to be addressed.

"Reforms will take several years and year one will focus on coverage and getting everyone access," Hilman said. "Mechanisms for wellness and personal responsibility are finer points to be addressed in the future."

Coons said as plans move forward for health care reform, he hopes that the country doesn't end up with some political solution.

"The political approach is what got us in trouble. The definition of insanity is doing the same thing over and over and getting the same results," Coons said. "Health care needs to be fair to the country and more importantly to the patients and families."