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The Salt Lake Tribune

WEDNESDAY, November 25, 2009

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State releases health plan ratings

Report » Privately insured Utahns happier with plans since 2005

By Lisa Rosetta
The Salt Lake Tribune

Updated: 11/24/2009 11:05:56 PM MST

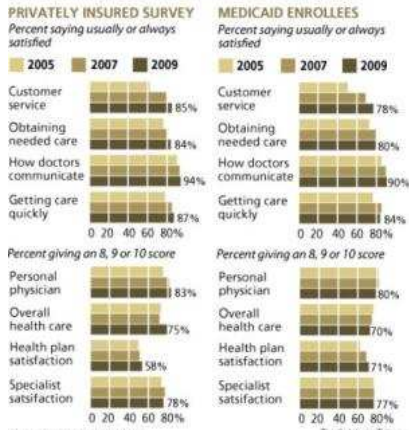
Utahns' satisfaction with most aspects of their private health plans is improving. Since 2005, more people say they are getting the care they need -- and quickly, a new Utah Department of Health report shows. Their doctors, and the quality of the care they're receiving, also received higher marks, as did overall satisfaction with their plans.

A total of 7,194 Utahns rated plans offered by both health maintenance organizations (HMOs) -- and, for the first time ever, preferred provider organizations (PPOs). The plans collectively cover 1.6 million people in the state, or about 70 percent of the insured.

Since the mid-1990s, more people have gravitated to PPOs despite their higher cost to gain freedom to see doctors they choose, said Sam Vanous, the health department's HMO health program manager. That made the insurers' inclusion in the 2009 Health Plan Consumer Satisfaction Report important.

New health department report

Since 2005, privately insured Utahns' satisfaction with many aspects of their health plans has improved. That didn't hold true, however, for people enrolled in Medicaid.



He said Utahns might use the report's results to make more informed decisions when choosing health plans.

Utahns rated HMOs higher than the national average in measures such as doctor ratings, getting care quickly, doctor communication and customer service, the report showed. The percentage of people satisfied with their overall health plan and health care, however, fell slightly below. PPOs, meanwhile, received above-national average ratings in every category except customer service.

The numbers show Utahns, who already enjoy higher quality care at a lower cost, have everything to lose in a federal approach to health care reform, said Kelly Atkinson of the Utah Health Insurance Association.

"The national health care reform is focused on access rather than cost," he said. "And until you address the cost, you can't really drive down the double-digit inflation that exists."

While the report shows Utahns are mostly happy with their health plans, it doesn't speak to the larger, unsustainable market trends that have forced many small businesses to drop their coverage, said Corey Capozza, senior health policy analyst for Voices for Utah Children.

Absent reform, health care will consume 20 percent of the country's gross domestic product by 2018.

"Paradoxically, even as we continue to spend more, we'll likely cover fewer people," she said. "It's not a recipe for long-term economic success or for a healthier, more financially-secure population."

About 10.7 percent of Utahns, or 298,200 people, are uninsured -- a group whose care is "cost shifted" to the insured, inflating their premiums by as much as 17 percent, said Janice Houston, the Utah Health Policy Project's coverage initiatives director. By tackling reforms that help expand coverage to everyone, "we start to see where reforms can affect in a positive way the bottom line."

Many people who lost their private coverage qualified for publicly funded health programs such as Medicaid. As of January, some 122,795 Utahns were enrolled in one of three plans: Healthy U., Molina and SelectAccess.

Collectively, they reported declining satisfaction with their health plans nearly across the board. The Children's Health Insurance Program, or CHIP, was above the national average in every category.

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To see the 2009 Health Plan Consumer Satisfaction Report in its entirety, visit

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