

# Key to reform: Get all Utahns covered

Plans would have to be affordable and portable, work groups say, but mandates wouldn't help

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For months, they've been brainstorming Utah's blueprint for health reform.

Now, with just weeks to go before the Legislature's Health System Reform Task Force wraps up, its work groups - providers, hospitals, the community and insurers - are finally rolling out the results.

They're striking common chords: free market reforms that make insurance more affordable, easier to shop for and hold onto, and that encourage all Utahns to get coverage.

"There is an emerging sense of what's important, and I hope, what is doable," said Greg Poulson, an Intermountain Healthcare vice president and chairman of the hospital group.

While stopping short of asking for individual mandates, the health care providers, for instance, make clear that all Utahns would have to get coverage in order for reform to work.

That means making plans affordable and portable, and issuing them based on a modified community rating - a form of standardized premiums, said Mark Bair, the group's chairman. It would also be guaranteed issue, meaning every person could get a policy despite his or her medical history.

The plan calls for maximizing tax advantages and choices. A Web portal with benefit information and costs would help consumers shop for insurance. But choice would come with responsibility - such as incentives for wellness.

Medical malpractice reform would also play an important role, Bair said, because the fear of lawsuits contributes to the overutilization of health care and drives up costs.

Nearly 300,000 Utahns are uninsured, and the cost of providing care to them is passed on to businesses as a hidden tax, Poulson said. Health care expenditures, meanwhile, are growing at an exorbitant rate, making insurance less affordable - which in turn creates more uninsured and underinsured.

Tackling health reform, he said, means wrangling with the two biggest problems: cost shifting from the uninsured to the insured - which inflates premiums by an average 17 percent - and increased utilization of health care.

While universal coverage is ultimately the goal, he said, "fiscal and political realities are supportive of more incremental steps."

Utahns, he said, should be able to purchase "simple, value-oriented" benefit plans that are free of expensive state mandates, and are administratively more simple, reducing costs for both insurers and providers.

These plans would be offered at lower monthly premiums, and would cover wellness and preventative care, and a variety of other services. Billing would be more streamlined, with the state requiring standardization among companies.

The community group, largely made up of advocates and physicians, did call for a mandate that Utahns buy insurance, as well as the shift toward community ratings, affordable plans and wellness initiatives.

"We need to make some changes in the rules of the marketplace," said Judi Hilman, executive director of the Utah Health Policy Project. "The main one being the insurance companies should have to compete over the right thing, like keeping us healthy, and not over the wrong things, like avoiding risk."

**What's next?**

Reform suggestions from insurers will be presented at the next meeting, on Oct. 31. But Utah insurers have been supporting the creation of a new plan called Net Care, intended to be a more affordable alternative to COBRA, an often-expensive avenue for people to keep an employer's insurance after they leave a job. Offered at one-third of the price of the average large-group plan, Net Care would be available to people coming off employer plans for up to 12 months, to help them transition to new coverage.