

Health-care task force seeks real stories

By James Thalman Deseret Morning News - Published: Tuesday, April 8, 2008 12:50 a.m. MDT

If you have no medical insurance, have no prospects of getting any or seriously doubt you have enough, a grass-roots advocacy group wants to hear from you.

The Utah Health Policy Project wants to add real-life stories of how Utahns are dealing with rising costs and declining access to health care services in the state.

A special legislative task force assigned to design a total renovation of the state's health care system will meet for the first time later this month.

The group will be inundated with statistics illustrating facts such as health insurance premiums increasing by 66 percent but wages increasing by only 13 percent in recent years. And they'll have every economic indicator that shows premium costs increases will actually surpass annual household income within the next 20 years if something pretty drastic isn't done — and soon.

"This is the first real opportunity to fix the system," Judi Hilman, executive director of UHPP said Tuesday. "But even more important, this is the first real opportunity for individual consumers to have a real say in how the reform plays out."

People are feeling so alienated by government machinations, economic forces and just the whims of life in general that the only thing they are certain of is that they'll be overmatched by whatever is coming down the road, said Hilman, who has seen at least two previous reform efforts come and go.

This can't be a piecemeal effort this round, she said. "This time it can't just be up to the governor or to lawmakers or to somebody else. I just can't stress enough that if there is something about the system that doesn't work or some way you can think of that will make it work better, we need to hear from you."

Hilman said any story is important enough, whether someone was on Medicaid and is now self-sufficient, a business owner who has dropped health care benefits or someone who wants to start a small business but can't because he or she can't afford to pay for even a part of the premium for employees.

"Anything that matters to you needs to be told and passed along to the task force," Hilman said. "These stories are critical to setting the table of how we're going to expand access, how we'll make it affordable, how we'll increase quality and how we'll contain costs."

Some other states are further along in the process and some that offer workable models, such as Washington state, Maine and Vermont, she said. "But whatever system is built has to be uniquely our own with as many voices heard as possible, or it simply will fall apart," she said.

For more information about the reform project and links to the legislative action leading up to it, visit www.healthpolicyproject.org.

To submit a story to UHPP or for details prior to doing so, e-mail stacey@healthpolicyproject.org.