

Moderating The Death Panel

By Carrie Ellis, Editor, Chem.Info

Appropriately, I write this blog from the comfort of bed — pillows stacked up behind me, tissue on my right, orange juice on the left, laptop whirring on my arched legs in the beautiful Gaylord Hotel in Orlando, FL. Considering that I flew here specifically to be at the Emerson Global Users Exchange (in amazing Floridian weather whilst my native Wisconsin is getting pummeled by rain and even hail), I couldn't help but think what a waste.

And when I say that, I by no means mean the event itself, which is proving to be quite valuable, but the fact that I'm here and sick, and not operating at 100 percent, but still expected to perform even if it is my own expectation.

It got me thinking about health care, as well as other health-related proposals both politicians and companies are throwing at the wall, much like spaghetti, just hoping that something eventually sticks. Companies seem to be getting more and more involved in such debate as they realize how important employee health is to their productivity and even overhead as far as health insurance.

Politicians also can't help but be involved, however preposterous their ideas. I recently read that a Republican senator is pushing an amendment to the current health care bill that discounts private health insurance up to 50 percent for people who lead healthy lifestyles. To that I say, what's the point of having health insurance then? Some people can't help their health history — what about them?

Another possibility that has been not only lip service, but also put into play is that companies become more involved in your personal health care issues and affect your health resolutions by incentivizing healthy decision making. Other companies are simply just handing their employees access to services and/or equipment that makes healthy living easier, such as smoking cessation support, fitness programs and gym memberships, etc.

One such example is Bison Gear, an Illinois manufacturer that was just recognized as the "Healthiest Company in America," winning an award that illustrates its commitment to employee health and well-being with innovative health and wellness initiatives that actually yielded measurable employee health improvements.

Health care is an enormous, overarching issue that I'm afraid only some are interested in enough to do the research, while others rely simply on what is

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regurgitated through the local evening news. Every company and individual will be affected by what is decided upon — even if nothing comes to fruition, it will affect you. If we do nothing, we’ll sink further into complacency, debt and sickness as a nation. If we do something, we just don’t know what will happen, which can be scary in and of itself.

As of now, [one American dies every 12 minutes from lack of health care](#) [1], according to David Himmelstein, an associate professor of medicine at Harvard. And it doesn’t look good for employers either. An article by the Associated Press states, “Costs for employer-provided health plans are expected to rise more than 10 percent within the next 12 months, a jump workers may feel in their paychecks or through changes to their insurance coverage.”

You see it everywhere, whether for or against or for modification in favor of or opposed to — it’s health care and everyone has an opinion. And each thinks his or her opinion is better than the next. But it’s not important what I think, nor is it important what Republican Joe Wilson thinks. It’s important that you at least think.

Where do you stand on the topic of health care? How involved do you want your employer to be in your health issues? What do you think of preventive medicine? How about incentivized health care?

Sound off by sending me an e-mail at carrie.ellis@advantagemedia.com [2].

Comments:

You asked for opinions / ideas on health care? Here goes:

Insurance is a big part of the problem. As most insurance is currently structured people don’t keep costs low. If a deductible is \$30, no matter if the Dr. (or medicine) costs \$50 or \$500, Why does any Dr. charge the lesser amount? Over time people want more services and are costs – rates and total services provided escalate. For many big employers the insurance administrator that works on a percentage of total cost. So, the more spent, the more the administrator ’ earns.’ The incentive is not structured properly.

The best improvement I have found is that represented by John Mackey (the Whole Foods grocery store) editorial in the WSJ by supporters of a public funded system. In his concept, health care accounts for all employee are used for all small to moderate needs, including all discretionary items such as dental. People then try to shop and save to make the funds go further. Only very large expenses, such as expensive chronic conditions would be covered by insurance. In my opinion the patient should pay perhaps 2% (or a sliding scale say 3% down to 1% above very high values, but not a fixed amount) for those expenses, so that they have an incentive to keep even those costs down.

Mr. Mackey doesn’t just advocate the program of health care savings accounts; he has a company with ~50,000 employees. He covers most or all of his employees, when most grocery store chains do not. This is detailed on a John Stossel ABC News program.

Similar and [much more detailed](#) answers are explained by David Goldhill in “The Atlantic” [How the American Health Care System Killed My Father](#) from a month or two ago is the best

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incentive issue and several other concepts to improve the system.

Employers should be encouraged to convert their health care plans to a similar concept. A similar concept could also be phased in for people entering public programs such as Medicare and Medicaid. If we pay a cost for each service they need, the whole pricing structure of the health care system would be a big step toward long-term sustainability, and would allow for better care for more people.

Without cost containment (which should use the patient's incentive as a major part) we will be able to offer an affordable program, and those that do, will have the wages for their health care programs will consume an ever larger portion of our tax dollars. These and other reform steps will greatly improve our system going forward.

Scott

I totally agree with what you have stated.

I don't reply to articles, but decided to respond to you because health care is a very big issue in

America needs some overhaul of the health care industry, but I personally don't believe it needs

As you stated, a lot of lip service has been performed, but little positive action.

The problem as I see it is that greed has had it's way in health care as it has in the financial industry that is self insured. They set the rules (prices/coverage). Since switching to self insured, the coverage went down. Why do I think they self insure? To make money off the employees. As a manufacturing country to a "service" country, the business people are all becoming banks and we know that better than manufacturing because that is what they study to become a MBA to

Politicians "think" they are the experts in many fields including this one. But stop to think what it would be to become a politician.

1.) enough money to run

2.) Enough votes to win.

Not many other minimum qualification except citizenship in some cases.

Does this make them businessmen/women or experts? I say no, and maybe exactly the opposite of what we need from the realities of everyday life.

If what they propose will work well, why do they exclude themselves?

It's reported that 9 out of 10 people are insured and pretty satisfied with their health care. Why not just ensure that the 10% for 10% of the population? Why not just ensure that the 10% has somewhere to go "when they get sick" that would cost less than \$900 Billion.

As with the financial system, health care needs some guidance, but not a government takeover.

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Thanks,
Howard

I'll try to be brief.

The health care system is not broken. I'm quite happy with what I have, and I really don't want to change with it.

Yes, the pundits will say that Medicare is government run health care and that is true. But I would not go into that program with no choice about it. I'd be just as happy if they returned all my Medicare money to be put into a health savings account just for that purpose.

I'm also familiar with another form of government run health care having served 11 years of active duty and currently in Reserves. The care was generally adequate, but it could vary considerably depending on where you were. I will say the services have come a long way in improving health care to the military over the years compared to what was available with the service. It used to be that the military rules did not require state board certified doctors and someone who couldn't pass a state board could work for the prisons and the military. Nice. No longer true.

Health costs are rising very quickly. True as well, BUT the care we get today is absolutely priceless compared to 30 years ago. Also, the availability is astounding. I can see a doctor today, and get an appointment in a matter of days. I will not find that kind of responsiveness in other countries with so-called "socialized medicine." It's not like today that our parents "just had to live with." As with everything else, you get what you pay for. It's not government telling a business how much they can charge. It's never worked before, it won't work now. It's not a job where the government told you how much you can earn?

Health insurance, it is not. What we have today are health maintenance contracts. It was not always like this. I am one of the ones who started this mess and it quickly moved into the corporate world as a perk. I remember back in the 60's, going to the doctor and my parents paid in cash or with a check at the end of the month. No extra staff, no huge corporations for the express purpose of writing the doctor a check. It was a small practice: the doctor and his nurse who handled the front desk and the shots and assisted with the procedures. Health insurance back then meant spending significant money before the benefits kicked in. THAT is the problem. This method of paying for health care has bloated the whole system beyond belief. Can you imagine paying a premium so someone will change the oil or replace the tires or brakes in your car?

With these paid health maintenance contracts, what incentive do people have to conserve? If health care is near free, people will use it willy-nilly. And they do. A \$20 co-pay is a joke. People spend more money on fast food than kids at McDee's. No wonder why our premiums have sky-rocketed. Incentivized care (the kind that I have) is better. In exchange for premiums that are \$150 per month less than traditional programs, I pay for my family \$2,000 for health care costs (doctors, hospital, prescriptions, whatever) to be paid for up to a \$2,000 limit, I have to pay out-of-pocket the next \$1,600 in health care costs. Once I reach that limit, my "traditional" insurance of 90%-10% kicks in. At a much higher level, then it goes 100%. By having a health savings account, my savings "pays" the \$1,600 "bridge" money over the course of the year and then some. Here, I don't spend all of my \$2,000 annual allotment, it rolls over to the next year. Now I have a real incentive to think how I use health care, because I can "save" for the things that really are important.

We need to get away from the notion that "someone else" pays for my health care. Only the individual can pay for their own health care.

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