



"Reports" from the Front Line of Healthcare Reform

Given the vehemence with which detractors have assailed healthcare reform and the fervor with which proponents have praised it, one could easily forget that no solid framework for reform exists. As of this writing, the House is hurriedly pulling together a bill, and the Senate may go into its August recess without a bill in place. There are no certainties in the realm of healthcare reform, making meaningful discourse a challenge.

It was refreshing to hear commentators on a radio news program recently emphasize that the big compromise they were discussing was simply one small part of a massive effort to develop a viable, bipartisan healthcare reform plan. And while healthcare reform seems inevitable, it is not entirely clear whether there is enough support among legislators to make the sweeping modifications many advocates seek. In short, while physicians and patients (i.e., the public) must continue to follow developments, they also must be sensitive to the fact that each daily development—though widely reported and analyzed—may have little impact on a final piece of legislation.

While President Obama, reportedly motivated by the failures of Clinton-era health reform, is seeking to move quickly toward reform, patience may be in order. Overhauling a system that will in essence affect every single American both personally and financially is a monumental undertaking. It's critical to maximize the opportunity and minimize missteps, goals not conducive to haste.

Perhaps the biggest question still facing lawmakers and citizens alike is a practical one: Who's going to pay for this? Ultimately, the answer to that question is likely to decide who supports and who opposes whatever reform plan emerges. This, too, is an area where haste and shortsightedness must be avoided. One integral element of reform may be an increased emphasis on wellness, preventive, and first-line consultation services; numerous studies show early interventions can prevent progression of chronic disease and even ward off some degenerative disorders while saving money for the healthcare system. Unfortunately, such programs are often first to be cut when budgets are tight. California is reportedly contemplating discontinuation of Poison Control Call Centers to eliminate a budget line item, even though many point out that more patients will unnecessarily turn to hospitals and clinics when the call centers close. A final reform plan must allow for the success of its plan features.

Healthcare reform is a challenging proposition, and anyone willing to wade into the fray deserves credit whether they share my views or not. The face of reform remains uncertain, but the coming weeks and months will surely bring more titillating reports and maybe eventually some meaningful information. PN



*By Paul Winnington
Editorial Director*

*(484) 581-1869
pwinnington@bmctoday.com*