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IDAHO IS NOT WAITING FOR FEDERAL HEALTHCARE “REFORM”

It seems like Washington, D.C., is tilting at political windmills these days. The Obama administration and Congress are still promising to slay the fire-breathing dragon of healthcare costs. But the beast they are fighting is, to a large extent, the product of the government-installed cage in which it evolved.

For 35 years now the federal government has been essentially running healthcare in America, masking market signals and supplanting the judgment of patients and physicians with the determinations of politicians, bureaucrats and lawyers. It should be no surprise that healthcare became “health management,” people became statistics, and the fear of liability became the biggest expense of all.

Now the federal government is poised to rescue us from the disaster it created, promising “reform” that amounts to little more than increasing government’s already dominant role in the healthcare system and further reducing the role of states like Idaho, not to mention individual patients and providers.

The public, policy makers and even patients contributed to the problem with their complacency. Having been lulled into a false sense of security by the promise of Medicaid and Medicare, we failed to insist on meaningful change and self-determination. But now the federal government has seized on healthcare reform as its mission in life, which means we should brace for still higher costs.

Largely missing from this discussion is the real work that Idaho and many other states are doing on their own to address healthcare needs, fulfilling their role as laboratories of the republic. That work includes controlling costs and improving access through a market-driven focus on preventive care, health promotion, building public-private partnerships, and application of technology and professional development.

I convened the Idaho Healthcare Summit in 2007 to evaluate Idaho’s healthcare system and recommend ways to make healthcare more affordable. The Governor’s Select Committee on Health Care evaluated the recommendations, gathered additional data and provided its top recommendations for implementation in a report submitted to me in 2008.

The recommendations focused on expanding the statewide use of electronic medical records to provide better coordinated patient care; expanding the use of patient-centered medical homes that shift the focus of healthcare to primary and preventive care; expanding the number of already eligible children to register for the State Children’s Health Insurance Program; and expanding the number of residency opportunities to attract primary care and specialty physicians to our state. We are making great progress on all those fronts. And at the close of 2009 I created the Governor’s Health Policy Implementation Committee, consisting of people who are experts in these fields, to foster continuing advancement of the priority areas over the next couple of years.

While there is still much more to be done, this much is clear: The federal government should not dictate our healthcare choices. The states, with public and private input, are capable of making changes to foster a better and more affordable healthcare system. We no longer can afford to be complacent and wait for the federal government to make things worse and take decisions out of our hands.

As Thomas Jefferson said, “A wise and frugal government, which shall leave men free to regulate their own pursuits of industry and improvement, and shall not take from the mouth of labor the bread it has earned – this is the sum of good government.”