

## Idaho State Journal, Thursday, May 8, 2008 – Staff report

# Health care overhaul pitched

POCATELLO - The president of Regence BlueShield of Idaho is convinced an overhaul of the U.S. health care system is needed, that it will have to originate from the individual states and that Idaho has the ideal population size to be a leader in the effort.

"Idaho is in the perfect place to drive the change because you have a pretty small community, the stakeholders can be more organized and more collaboration can be achieved, and costs can be very quickly analyzed and reviewed," the insurance company's president, John M. Stellmon, said.

Stellmon made a stop in the Gate City Wednesday morning during a tour of Eastern Idaho. He sought to persuade clients that changes should be made in the nation's health care system to make it easier for medical patients to shop for the best values.

"I'm trying to sell them a concept. I'm trying to sell them a culture," Stellmon said. "Insurance companies need to provide the tools (for customers) to spend health care dollars in a more attractive way."

Stellmon made his pitch to the state's subcommittee on health care, and he anticipates many of his suggestions will be reflected in recommendations by the subcommittee about how to reform Idaho health care. The recommendations should be released by this summer, he said.

Stellmon would also like the state to start a dialogue about having interoperable medical records - records on an individual's medical history that could instantly be accessed by any medical provider. Currently, Stellmon said hospitals often have to go through the hassle of contacting patients' medical providers to get records faxed, and the system leads to unnecessary errors in medical records, as well as duplications of services.

A few years ago, Idaho enacted a pilot project to test effectiveness of so-called insurance parity - giving comparable insurance coverage for both mental and physical ailments. Idaho enacted parity for state workers, theorizing that after some initial increases in medical costs, savings would be achieved because people with mental disorders disproportionately report physical ailments.

Stellmon believes it's too early to tell yet if the pilot project is working.

"The presence of mental health issues in a family does increase the incidences of physical health (problems)," Stellmon said. But he added, "Those kinds of policy changes in my mind nibble around the edges of changing the system."