

> **Health care****Save the safety net
— and save money****George
Isham**

In terms of health-care coverage, Gov. Tim Pawlenty's second budget proposal this year is an improvement over his first. His latest proposal still would take coverage away from 55,000 Minnesotans, but tens of thousands would keep the state health coverage his first proposal would have ended.

Federal stimulus money helped — but that's one-time money, and in two years, tens of thousands of people will again be wondering if they will have coverage or not. Taking away health care coverage isn't the right answer now, and it won't be the right answer then.

Yes, we need to cut medical costs. Here are some ways state government can do that and still preserve our safety net:

Reduce overuse of services. Our state wastes hundreds of millions of dollars a year on medical services and procedures that don't help patients get better. A new report by the National Priorities Partnership says examples of unnecessary care include overuse of antibiotics, unnecessary CT scans for heart disease screening, unnecessary cesarean sections, spine surgery and hysterectomies. We could save as much as \$125 million a year if the state paid only for services that are recommended based on scientific evidence for all state employees and members of public programs.

Reduce unnecessary emer-

gency room use. The governor's proposal would cut dental care for much of our state's Medicaid population. Some might think this simply means fewer teeth cleanings, but the fact is much of the dental care for this population is to prevent major, potentially deadly problems. Take the example of 12-year-old Deamonte Driver. In 2007 an infection from an abscessed tooth spread to his brain. An \$80 tooth extraction would have saved him. His family lost state insurance and couldn't afford that. Instead, Deamonte spent weeks in the hospital before he died. The medical bills were expected to top a quarter of a million dollars.

This story shows why cuts to state programs don't prevent sickness and they don't save money. Every day, HealthPartners Midway Clinic, which is designed to serve low-income Minnesotans, treats a case like Deamonte Driver's. Take coverage away, and that's one more patient who will be forced to go to a Twin Cities emergency room every day. The higher cost of an emergency room visit that could have been avoided is something we'll all pay for in the form of a hidden tax.

Hospitals like Regions Hospital and Hennepin County Medical Center provide the most charity care in the state. The governor wants to create a charity care pool to cover some of the cost for people losing hospital coverage. This idea recognizes a need to help protect hospitals from the growth in uncompensated care.

A better approach would be to protect people by making sure all Minnesotans have health care coverage. Health coverage improves health and reduces

costs because it provides access

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to primary care and preventive services.

Increase generic drug use. Another way the state could save millions of dollars would be to increase the use of generic drugs among state employees. Every 1 percent increase in generic drug use among HealthPartners members reduces drug costs by \$9 million annually.

Cut red tape in government programs. Simplifying and consolidating the various government programs would make the system easier to use and cut administrative expenses. Wisconsin did this in February 2008 and added online enrollment. BadgerCare Plus consolidated and simplified three existing programs that provide health insurance to low-income families in Wisconsin: Medicaid, Healthy Start and BadgerCare.

Last year, the governor and the Legislature took a big step forward by passing health care reform legislation that emphasizes prevention and primary care. The governor's current proposed budget reverses this accomplishment. As the governor and the Legislature work to balance the state budget over the next two months, let's hope they keep the health care safety net in place.

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