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VIEWPOINTS

Seven Simple Ways to Cure America's Health-Care Ills

By: Andrew F. Biernat

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As president-elect of the New York State Association of Health Underwriters, I have paid close attention to the boisterous health-care debate that consumed headlines this summer and has confused Americans about this issue more than ever.

Unfortunately, much of the partisan wrangling has been counter-productive and threatens to derail health-insurance reform altogether. Often, the debate became more about personalities, political vendettas, and punditry, rather than practical solutions.

Enough already. To move forward with a clear path for meaningful reform that truly benefits the masses, it's time to slash the issue to the core and achieve what we believe are seven critical and obtainable objectives that need to be enacted.

1. Mandate coverage □ The best way to ensure that everyone is covered is to require it, just as we require all drivers to maintain an auto-insurance policy. By making health-insurance coverage mandatory, we can treat diseases early. That means hospitals won't be overrun □ as they often are □ with long lines of cold and flu sufferers every January.

2. Premium assistance □ If we mandate coverage, we need to provide those with low incomes the ability to pay for it. The costs to help these people pay for health insurance would be less than the federal government's costs to administer a public plan. Congress must recognize that real savings result from a sensible system that includes universal health coverage, not a system that offers more red tape.

3. Wellness care □ When people have health insurance, illness is more likely to be diagnosed early, when treatment is more effective and less expensive. Programs that encourage healthy lifestyles should be further encouraged by the government to save money and improve public health.

4. Standardized electronic medical records □ It's simple, but true: Requiring a system of electronic medical records will save money and dramatically improve the quality of health care. We have the technology; let's use it.

5. Eliminate rescission and denial of coverage due to pre-existing conditions □ These are sensible reforms that the health-insurance industry has already accepted and that legislators on both sides of the aisle can agree on. New York is already a leader in many of these areas and much of the current debate centers around issues that have already been resolved here.

6. Tort reform □ Tort reform would go a long way toward reducing the cost of health care. Doctors today practice so-called defensive medicine, □ subjecting patients to a slew of expensive, perhaps painful, and in many circumstances, unnecessary tests to avoid malpractice cases.

7. Establish best practices □ It has been documented that doctors in various regions vary widely in their approach to treating disease. Some of these practices clearly have better results. In a system that includes tort reform and standardized electronic medical records, the health-care industry could conduct excellent research and establish a set of guidelines for doctors to follow, protecting them from lawsuits and helping them to get the best results for their patients □ all as part of a system that saves money and provides health care for all Americans.

If passed as a comprehensive health-care bill, these seven reforms would ensure that people get the health care they need at a realistic cost. America still has the best health technology that money can buy, but we aren't at the top of the statistical charts because too many people are unable to take advantage of it.

What we all learned this summer, through raucous town-hall forums and partisan television commercials, is that Congress is struggling for a solution to cut through a complex mess that has evolved from years of bad policy, expensive mandates, and lack of political will. President Obama has indicated his willingness to compromise to ensure a plan moves forward.

Now is the time for Congress to move beyond the pundits and lobbyists. They need to be guided by health-care professionals who know the system better than anyone else. And, by using the seven guidelines I've mentioned, lawmakers have an achievable plan to follow.

I look forward to celebrating their victory.

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HEALTH CARE

Syracuse Behavioral Healthcare to expand to Rochester
 SYRACUSE - Syracuse Behavioral Healthcare (SBH), an organization that helps families struggling with alcohol and other addictions, plans to expand its services to Rochester. SBH intends to open a 25-bed detoxification program in late December. The

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VOICES & OPINIONS

FROM THE PUBLISHER
Hiding the cost of the War on Poverty

In my last editorial, entitled □War on Poverty turns 45□ in the Sept. 21-Oct. 4 issue of The Mohawk Valley Business Journal, I pointed out that the very term was a charade. The yardstick used to measure progress in the □War□ hasn't been substantially

TEERING OFF / FROM THE EDITOR

Narrow SU Win Could Provide Big Business Boost

When freshman Ryan Lichtenstein's 41-yard field goal sailed through the uprights last Saturday night (Sept. 19), it gave Syracuse University's (SU) victory-starved football program more than just a much-needed, thrilling win over Northwestern

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ON THE MOVE

Mohawk Valley People on the Move 10/5/09
 BANKING

John A. Elberson has been appointed Oneida market executive for Alliance Bank, N.A. Elberson is a vice president in the bank's Commercial Banking Division. Elberson attended Le Moyne College on a baseball scholarship and worked as an

MARKET RESEARCH

Top Ranks Lists
 The 2008 Book of Lists electronic edition may be downloaded in Excel format. These 57 lists include key business information (when available) such as number of employees, revenue, products/services offered, and top executives for each company.

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