

Achieving significant healthcare reform requires a congressionally mandated commission

By *Randy Oostra*

As CEO of ProMedica, an Ohio-based integrated healthcare network, it is beyond disturbing whenever I read about more research demonstrating that Americans comparatively live shorter lives and experience more disease—despite our spending vastly more for healthcare than any other country.

We desperately need healthcare executives to step up and lead a wholesale redesign of how care is delivered and paid for in this country.

As readers are likely aware, for the first time in 100 years life expectancy has declined for three consecutive years. The number of non-elderly uninsured has been increasing since 2017 and is now nearly 30 million. Nearly half of those insured are underinsured, the same percentage as before passage of the Affordable Care Act. A widely reported 2018 Federal Reserve poll found 40% of adults could not afford an unexpected expense of \$400. A more recent Gallup up poll found that 13% of adults, or 34 million Americans, admitted knowing someone who died because they could not afford necessary medical care.

Healthcare spending, currently at more than \$3.6 trillion, is projected to reach \$6 trillion by 2027, or one year after bankrupting the Medicare trust fund. Nearly \$1 trillion of that spending is considered waste. Pay-for-performance models, such as accountable care organizations and bundled-payment arrangements, have yet to come close to bending the cost curve.

We continue to measure quality without accounting for value or outcomes relative to spending. Social service supports remain largely unaddressed. Healthcare disparities continue to persist. All this and more leaves physicians and other clinicians with unprecedented rates of burnout, major depressive disorder and unacceptable rates of suicide.



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The evidence dictates an urgent need for major healthcare reform.

Over the past year, representatives from ProMedica and several other healthcare networks throughout the country have preliminarily met with germane congressional committees and leadership offices advocating for a congressionally mandated national healthcare commission.

There are numerous examples of congressionally created commissions. A November report from the Congressional Research Service identified well over 100 established since 1989, including the 1997 National Bipartisan Commission on the Future of Medicare, which helped lead to passage of Medicare Part D legislation in 2003. While commissions have had mixed success, the stakes have never been higher. We see no alternative.

A commission—preferably time-limited and comprised of bipartisan leaders as well as experts representing the diversity of healthcare and social service providers—would make policy recommendations to Congress that would,

in sum, improve population health, reduce spending growth and address the social factors that increasingly are understood as major factors in affecting health outcomes.

It is currently our view that such a commission would need to address five principles: healthcare coverage must be universal and affordable; emphasis must be placed on primary care, behavioral health and healthy aging; social service supports need to be integrated; healthcare spending must be made efficient, meaning of increasingly higher value, measured as outcomes achieved relative to spending; and finally, but by no means least, the healthcare workforce must meet the demand for services, especially in serving care needs in rural areas and in behavioral health.

We will continue to meet with congressional leadership staff through this session. Our hope is that leaders independent of party affiliation will appreciate—for at least three reasons—the importance of, and the necessity for, a healthcare reform commission: The failure to pass surprise-billing legislation in 2019 again demonstrates Congress' difficulty in setting aside partisanship; polling data show healthcare is the most important issue voters take into consideration when evaluating 2020 candidates; and, as genuine and passionate as Medicare for All campaign pledges are, successfully legislated healthcare reform should be methodically examined.

We invite your participation in joining us in this effort. If not now, when? ●