



TIMES UNION

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No cheap remedy in universal care: Albany forum told that new programs in Massachusetts, Maine carry expensive costs

By Cathleen F. Crowley

ALBANY — Reducing the number of people who don't have health insurance is an expensive and complicated task, said speakers from states that have adopted sweeping health care reforms.

Celia Wcislo, a player in Massachusetts' health reform, poked a hole in the dreams of anyone who believes universal health care will save money.

"It costs twice as much to insure people than paying for the sick ones who show up in hospitals," Wcislo said.

Wcislo spoke Wednesday at the Rockefeller Institute of Government's forum called "Achieving Universal Health Care Coverage in New York: Lessons From Maine and Massachusetts." Wcislo, a member of the 10-person board responsible for redesigning the Massachusetts insurance system, and Elizabeth Kilbreth, a Maine professor who has studied Maine's reforms, shared their experiences and observations from their home states.

The audience of about 40 people drew policymakers, legislative aides and members of the health care community. The meeting was undoubtedly wonkish, but fascinating to the people involved in redesigning New York's health system.

Deborah Bachrach, deputy commissioner of the state Office of Health Insurance Programs, sat on the panel as a "responder" to the out-of-state speakers. She scribbled notes and asked questions like an eager student.

"This is incredibly interesting," Bachrach said. "You've confirmed for us that this is really complicated and baby steps are the way to go."

Kilbreth, who teaches at the University of Southern Maine's Muskie School of Public Service, gave an overview of Maine's reform initiatives: expanded Medicaid and a new state-subsidized insurance plan for small businesses, the self-employed and some uninsured individuals.

About 15,000 people enrolled in the state insurance plan, called DirigoChoice, and 63 percent of the new members were previously uninsured or underinsured. The average household income for people on the plan is \$11,814.

The program costs Maine \$31 million. It is so expensive, Kilbreth said, because the program provides drug benefits and vision care and because health care costs in Maine are so high.

The funding mechanism — an assessment on health insurance premiums — is being legally challenged by Maine insurance companies. The reforms are unsustainable if health care costs for employers and taxpayers are not reduced, Kilbreth said.

Massachusetts expanded Medicaid to 50,000 additional residents and created several state-subsidized insurance programs designed to be affordable. Unlike Maine, which contracts with one insurance company to administer the state insurance program, Massachusetts required private insurance companies to offer and administer the plans.

Wcislo said Massachusetts underestimated the number of people who are uninsured, which may have significant financial consequences for the reform initiatives. Already, 200,000 people have enrolled in the state's new insurance programs, increasing health care costs by \$150 million. The cost could increase \$350 million next year, she said.

Bachrach and other state officials said it was clear that health reform must be combined with cost-containment initiatives, such as creating financial incentives for preventative care.

A forum will be held at the First Unitarian Universalist Society of Albany, 405 Washington Ave.,

from 2 to 4:30 p.m. Sunday. The event, sponsored by the Capital District Alliance for Universal Health Care, will cover the debate and analyze some of the ideas proposed for universal insurance.

Cathleen F. Crowley can be reached at 454-5348 or by e-mail at ccrowley@timesunion.com.