

Business

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Tom Eblen: Health reform is just beginning

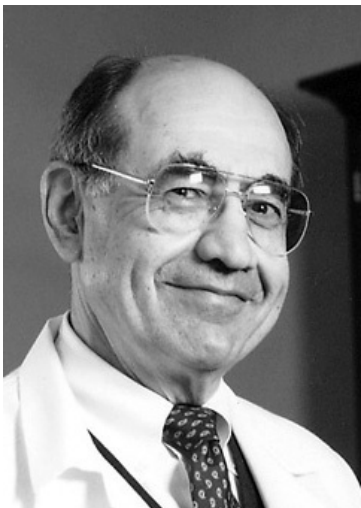
Friedell committee is exploring ways to improve system

Tom Eblen - Herald-Leader columnist

Just thinking about America's health care and insurance system can make your head hurt.

Our system costs too much, doesn't work well enough and leaves too many people out. The new reform law includes more people, but it doesn't do enough to improve care or rein in costs. It was little more than a first step in what is sure to be a long journey toward making health care more effective and affordable.

What should the next steps be? That is what the Friedell Committee for Health System Transformation is trying to help Kentuckians figure out.



Dr. Gilbert H. Friedell, board president of the Friedell Committee for Health System Transformation and director emeritus of the University of Kentucky's Markey Cancer Center. Photo provided

[Bluegrass & Beyond: Tom Eblen's blog](#)

The committee is named for and headed by Dr. Gilbert Friedell, director emeritus of the University of Kentucky's Markey Cancer Center. It hopes to do for health care reform in Kentucky what the Prichard Committee for Academic Excellence did for education reform: engage Kentuckians, not just experts, in finding better ways to do things.

Part of the problem is that, unlike education, health care isn't so much a system as a disjointed collection of business sectors. Many profit by exploiting the system's inefficiencies or by providing services, not by making the system more efficient or improving health. Medicaid and Medicare, the government programs for the poor and elderly, have a huge influence on everyone's care — and cost of care.

The Friedell Committee is a non-partisan, non-profit group of 50 people from across Kentucky. Some are health care or social service professionals, but most come from other walks of life. Many are retirees who have expertise, but no vested interest that they must represent. They research problems and possible solutions and urge

community education and action.

The Friedell Committee began in 2008, but its creation goes back to 1992, when state and national leaders first started talking seriously about health care reform. Public hearings in each of Kentucky's 15 area development districts attracted 5,000 participants; their recorded comments were collected into a 2,000-page transcript.

Friedell said an analysis of that transcript led to the group's 10 value-based principles for health care reform. Those include making health systems accountable to the public, and making health professionals responsible for providing safe and effective care.

Among the committee's other principles: Individuals and families should have fair and equal access to high-quality, high-value and affordable care. Patients should be treated with respect. Individuals and communities must share responsibility for health and the cost of care.

As with education, Kentucky has many health-care challenges. Kentuckians eat too much, smoke too much and exercise too little, putting the state at or near the top of national rates for cancer, heart disease, diabetes and premature death. The challenge isn't just treating illness, but promoting healthier lifestyles.

Because this is a relatively poor state, one in five Kentuckians is on Medicaid. Because of changes in federal legislation, that number is expected to be one in four, or about 1 million Kentuckians, by 2014.

I attended part of the committee's semi-annual meeting last week in Lexington, where working groups discussed issues they are investigating. One group is working with Kentucky hospitals to track hospital-acquired infections, which kill many patients. Another is looking

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into team approaches for providing primary care at lower cost. Federal legislation provides incentives for developing such new models of care; 44 states now have demonstration projects, but Kentucky isn't one of them.

The committee just launched an effort to find at least one "success story" from each Kentucky county for improving health care, fitness or nutrition. The hope is that publicizing those stories will inspire other counties to copy or adapt them.

For more information, go to the committee's Web site: www.friedellcommittee.org.

"We don't claim to have all the answers," said Carolyn Dennis, the committee's executive director. "We just want to empower citizens to ask the right questions."

Reach Tom Eblen at teblen@herald-leader.com or (859) 231-1415 or 1-800-950-6397, Ext. 1415. Read and comment on his blog, *The Bluegrass & Beyond*, at Kentucky.com.



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treybie wrote on 06/14/2010 04:14:20 PM:

Replying to hl_sux (06/13/2010 04:15:45 PM):

"treybie: your Enterprise system just guarantees fewer providers and assures that quality will eventually go down. Why? Lack of competition. Why in the world would you not want to have specialists in more locations?

What our system needs is more competition, not less. And less regulation. Let...": If I'm in an ambulance having a heart attack I want to go where the best heart doctors are instead of the closest hospital trying to 'compete'. I don't think the government should mandate an Enterprise system but I think that both the hospitals and the public would benefit under such a system. If it is purely about competition then do away with all health insurance and watch prices plummet. If insurance didn't pay the huge bills then doctors could only charge what people could afford to pay. That is extreme and will not happen which demonstrates why concentrating on competition to the exclusion of other factors is the wrong approach.

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boz wrote on 06/14/2010 01:04:32 PM:

One suggestion would be for hospitals, clinics, etc. to stop newspaper, TV, and radio advertising. Nationally, medical adverts cost over \$1 billion per year, with large hospitals spending over \$1 million/year. A local hospital has a banner ad across the bottom of the front page of the HL nearly every day.

Another is for every hospital to stop duplicating expensive equipment which then has to be paid for by trolling for patients to use it. Case in point: DaVinci robotic surgery. Definitely a great advance, but I think there may be 3 in Lexington. If the hospitals have to advertise for patients to have procedures to pay for them, maybe there are 1 or 2 too many.

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Thomas wrote on 06/14/2010 12:20:59 PM:

Replying to localguy (06/14/2010 09:51:51 AM):

"The most serious problem with US health care has always been a stronger focus on the terminal end of care when medical intervention is the least effective and the most expensive. The new reforms enacted by Congress will begin to shift more money an attention to prevention and earlier diagnosis where...":

Thank you for your comment skinny,pale. pro-abortion, possible gay, left wing liberal.

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saralde wrote on 06/14/2010 10:02:12 AM:

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**saralde** wrote on 06/14/2010 10:01:23 AM:

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**saralde** wrote on 06/14/2010 10:00:55 AM:

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**droslovinia** wrote on 06/14/2010 10:00:19 AM:

Gil Friedell is one of the best people I've ever met. His care for the people of Kentucky is beyond question, so if he's got something going here, I'd really like to see what they come up with. By now, we're all starting to see that the feds can do little against the mountains of money propping up the status quo, so it's about time that more states started working things out for themselves!

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**localguy** wrote on 06/14/2010 09:51:51 AM:

The most serious problem with US health care has always been a stronger focus on the terminal end of care when medical intervention is the least effective and the most expensive. The new reforms enacted by Congress will begin to shift more money an attention to prevention and earlier diagnosis where cost effectiveness and longer term health benefits prevail. Obesity and diabetes are an overwhelming and severe crisis in KY that give rise to long term costs that are breaking the budget in this state (and others). I applaud the new health care reforms and this committee's efforts to begin the difficult process of promoting healthier lifestyles in a state full of overweight right wing fools who consistently refuse to face up the facts.

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**jazzjam** wrote on 06/14/2010 09:12:30 AM:

It is nice to see that someone has wanted to fix health care since 1992. It is seriously broken. They must all be republicans because nothing has happened.

As long as health care is a business it is not about taking care of people. It is about making a profit. As Rand Paul said "Physicians deserve to have a comfortable living." Yeah, right. It's like people in the medical business need to be more wealthy than everyone else. So, let's take all the money from common people that we can before they die. That's our medical system.

On the other end of the spectrum we have medicaid, medicare. They help a lot of people, but the fraud is rampant. No one to watch the cookie jar. Again, money is driving the bus.

Nice article, but we all need a reality check here.

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