

Group B: Insuring A Healthy Hawaii



Policy Issue Brief:

“Insuring a Healthy Hawaii” by Susan Chandler & Gerard Russo

Members:

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Summary of Work Sessions:

Session I. Preferred Futures and Public Policy Strategies

The workshop participants focused on two major themes: (1) preventive strategies, such as education and incentives, to encourage individuals and communities to become involved in healthier lifestyles and (2) to insure universal, basic health insurance coverage and access for all.

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The group discussed a variety of policy approaches to encourage health promotion activities through personal and structural (economic) incentives and disincentives. There was agreement that the schools were an essential partner in ensuring success in promoting healthy habits, appropriate nutrition and exercise. Suggestions also included finding strategies to support changes in the food industry towards producing more nutritious foods and decrease “junk” foods. The preferred future would focus on promoting lifestyles that maximize health and reduce chronic illness.

The second set of options discussed were around universal health insurance and access to appropriate medical care. The preferred future would provide universal health care access for basic medical care, prevention, chronic care and rehabilitative services regardless of the ability to pay. This should be Hawaii’s definition of the health state.

Session II. Public Policies and Recommendations/ Next Steps

The priority policy recommendation was to establish community-based wellness networks that promote education and implementation of healthy nutrition and disease control strategies. The focus would be on schools, universities, prisons, businesses (restaurants), government, faith-based organizations, etc.

The second policy area was to ensure health insurance and access for all citizens in Hawaii. Strategies include expansion of traditional, private health insurance, subsidies for low income individuals, as well as the expansion of the safety net programs.

The group agreed that more discussion was needed as the next steps. They also agreed that the policy center should assist the state in conducting needed research (like the Hawaii Uninsured Project); organize and facilitate more policy dialogs; bring in Legislators, funders, cultural advisors, the DOE, Board of Education, DOH and health professionals to the discussions.

B. Insuring a Healthy Hawai`i

Susan Chandler and Gerard Russo

Background

Policy Areas and Goals

The goal of the Work Session on Insuring a Healthy Hawai`i is to bring together policy makers, practitioners, stakeholders, consumers and researchers working in the area of health policy issues and begin a deliberative process which forms a common ground for action. There are several clear indicators on the horizon that will pose a challenge to communities desiring to insure that citizens receive the medical care and health insurance they need. The demographic indicators for the nation and Hawai`i point to a rapidly rising aging and disabled population over the next 20 years. Medicaid costs across the nation and in Hawai`i are rising substantially and states and the federal government are not able to meet the increased costs. In the public sector, states are reducing eligibility levels, freezing provider costs and or reducing benefit packages. Some states require co-payments on the poor who receive services. In the private sector, employers are reducing coverage or increasing employees' co-payments in response to increasing health insurance costs. Long term care costs are continuing to rise as are the costs of prescription drugs with no national coverage for consumers. Medicare and Medicaid are facing their strongest challenge to date. Can these programs be sustained? Will these programs survive?

With the increasing drain of federal, state and local dollars going into health care, other important issues of community interest may get delayed or ignored. Entitlements are difficult to reduce or revise. Increasing out of pocket costs for consumers and increasing costs for employers result in economic strain in the community. Important questions for this group include the following. How will the increasing costs of financing our health care system effect other essential issues in our community? What will the health care system look like in the next 10-20 years as demand outruns the community's ability to pay? How can the high quality of Hawai`i's health care be sustained in the future in the context of such a difficult future?

A policy summit sponsored by the Hawai`i Uninsured Project was held in Honolulu in November, 2001. The goal of that project was to examine methodologies for the state of Hawai`i to insure its uninsured with adequate health insurance. After significant dialog among a variety of groups, the Department of Health along with the University of Hawai`i, the Hawai`i Institute of Public Affairs and other community groups secured a federal grant to continue this dialog and conduct economic models to examine the cost-benefit analysis for several policy options and alternatives that are being developed. The Public Policy Center wants to support this innovative collaboration and support the process and outcome. This workgroup will be asked to look ahead and begin to prepare for the future when new opportunities for policy alternatives may arise.

Beginning Policy Thoughts:

In order to frame the dialog, we have begun to list some policy options for discussion. Our first task as a group will be to review this list and add others as needed. Some examples are analyzing:

- the existing federal health insurance programs
- state-only programs
- Hawai`i's employer based mandated coverage
- the existing health insurance market
- the safety net
- a single payor insurance system
- the Employer Retirement System
- a state (or federal) prescription drug coverage plan
- re-structuring Medicare
- re-structuring Medicaid
- State/private coordinating board for health data
- data sharing in the world of HIPAA
- future "partnerings"

Health Insurance Data

Recent tabulations by Russo et al. suggest that an estimated 9.6% of Hawai`i's population are without health insurance coverage during the entire year of 2001. This is about 117,000 people. While Hawai`i had been known as the Health State for many years, and had the lowest number of uninsured in the nation, this number, while perhaps not the lowest in the nation, is below the national average estimated to be about 15%. It is important to collect these data and design on-going partnerships to keep these data up to date and accessible for researchers.

Issues

It is hoped that this group will be able to look ahead and suggest continuing collaborations and strategies for on-going support of good policy initiatives. For example, we might want to discuss the need for the development of a state/private coordinating board for policy analyses, data repositories and on-going institutional supports. Where do we want to be 5 years from now and what are the next steps to getting there?

This policy group will exchange viewpoints, research and experiences on policy options from different perspectives. Hopefully, by bringing together a broad based group of interested and experienced people, we will be able to develop a policy agenda that addresses a few fundamental issues that are problematic to Hawai`i. If there is sufficient interest and commitment among the participants, the group may form a core of a long term collaboration of individuals dedicated to addresses these concerns and finding solutions.

The College of Social Sciences Public Policy Center would like to be available to facilitate and support this effort.

This policy group will bring together a collection of scholars and practitioners committed to improving the health care of Hawai`i's citizens. While each group member may come from a different perspective and has different experiences and expertise, the premise of bringing this

divergent group together is that each can learn from another and build problem solving constituencies.

The deliberative dialog format permits the synthesis of many different experiences and perspectives into a shared framework of understanding. Hopefully there will be time to explore pro and cons of options, get beyond the initial “positions” to learn about what people feel is truly valuable; weigh carefully the views of others and identify a shared sense of policy direction and range of action that are consistent with one another.

B. Insuring A Healthy Hawaii

Work Session I. Preferred Futures and Strategies

Community / Individual Lifestyle Intervention

- Prevention actions for sustainability:
 - All children in elementary school should be educated on the risks of skin cancer associated with sun exposure and the importance of wearing sunscreen and protective clothing, Sun screen will be made available to children in public schools.
 - Physical education will be an essential core program in all public schools throughout intermediate and high school years
 - All schools shall have a nutritionist on staff.
- Health education
 - Educate people on how to take care of themselves
 - Educate children and parents on the importance of nutrition and exercise
- Personal responsibility
 - get people to accept responsibility to participate in own health - best to take care oneself before getting to the point of taking pills
 - LTC insurance
- Prioritize community based "social model" health care systems
 - non-institutional
 - non-medical, "medicine" model
 - health promotion
 - Insure universal, basic health insurance coverage and access.
- Educate children and adults about healthy lifestyles and provide incentives to get there
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- Health - equalize educational opportunities and resources
- Policy- require public officials and state employees to enroll their kids in public school or convert privates to public.

- Make health care available to all -- period.
- B. Policy - any and all ways to get there as priority. Universal health cares, expand public coverage, support safety net.
- Promote healthy activities effectively - as effectively as unhealthy ones such as tobacco use, junk food, Etc,
- Insist on posted handouts at fast food restaurants of food values such as subway does. One chain can even give you a printout of the nutritional value of the food you purchased on your cash register receipt. Increase awareness so people can make better choices.
- Diet- Require all public entity food sources to offer salad of coleslaw as an alternative any place where French fries, onion rings, or the like are offered.
- Community care / wellness networks
- Make Hawaii truly the healthy state
 - Assumption - nutrition related disease us the leading cause of death
 - #1 Heart Disease 32%
 - #2 Cancer 24%
 - #3 Stroke 7%
 - #6 Diabetes 4%
 - Total 65%
- Action: Until we deal with the cause - Health care will continue to spiral out of control
 - We need to reward a Nutrition / Lifestyle approach to disease prevention
 - Must deal with industry to decrease incentive to produce junk food and increase incentive to produce fresh fruit, vegetables, whole grain, and legumes
- Assumption:
 - Nutrition affects behaviors that increase costs of "Felix" kids increase cost of prison and rehab.
 - Use nutrition to help decrease ADD in school and recidivism among inmate population
 - Introduce diet into school
 - introduce diet into prison

- Health insurance and access
 - Health insurance coverage for all
 - How do we afford universal coverage
 - The state of Hawaii has this policy: Every person in Hawaii will have access to affordable health care insurance and / or healthcare.
- Universal Health Insurance Coverage
 - all residents of Hawaii should be covered by some or of health insurance
 - Medical vs., Health Insurance
- Policy to encourage intervention / prevention focused health insurance.
 - Decrease Government subsidies for medical care, especially for high income families,
 - Increase health promotion and prevention subsidies

Work Session II. Public Policies and Recommendations/Next Steps

WHAT ARE THE 2-3 PRIORITY PUBLIC POLICY AREAS:

- Develop community care/wellness networks
- Expand health insurance and access
- Develop individual/community lifestyles interventions
- WHAT SHOULD HAPPEN NEXT TO ADDRESS THOSE PRIORITY POLICIES?
 - More discussion to focus the issues
 - With the idea of promoting Hawaii as a Health State--Create a coordinated initiative toward promoting nutrition and intervention that include insurance reforms (reimbursement of nutrition service) schools, prison, and other institution and the private sector (restaurants, etc.) and promoting agricultural self sufficiency
 - Engage more stakeholders, EG., farmers, fast food vendors, medical sector, legislators, care givers, NPOs, faith-based institutions, educators, etc. meet and present case for lifestyle interventions, wellness networks and insurance access.
 - Continue and explain working group
 - Priority to community/individual lifestyle and community wellness networks, and universal coverage and/or access is already started
 - Cultures appropriate modes of living--
 - Dialogue with DOE--D&H regarding health education, and theft in schools
- WHO ELSE SHOULD BE INVOLVED?
 - Schedule the conferences when legislators can attest
 - Invite observers to meetings--such as HI uninsured project.
 - Legislators
 - Body of education
 - Schools, politician, Health Prime specialists, etc.
 - All the above, plus funders, corporations, cultural advisors
 - Providers, community-base leaders, DOE, legislators, community members
 - Medical providers
- HOW CAN THE PUBLIC POLICY CENTER HELP?
 - Mobilize the UH community to contribute to leg. and other public policy debate

- Tweak UH research to subsidize pilot projects
- More research
- Facilitate
- More political action
- Organize, convene, research, present the case and support planning and decision process.
- Help draw in resources
- Provide leadership and influence leaders
- Do research on what people need to make change economic impact and cost of policy change model scenarios to inform policy-makers
- Inform leaders of what center can do
- Research--demonstrate projects on live stage changes, demonstrate projects on wellness, and need research on current news--other issues--