

Regional Forums on Health Insurance

Summary of the Regional Forums on Health Insurance sponsored by the State Planning Grant, Health Planning and Systems Development, Alaska Department of Health and Social Services, July 2007.

Summary presented to Alaska Health Summit, Dec. 5, 2007, by Eric Peter, Health Program Associate, HPSD/DPH/DHSS.

Forums on health insurance coverage were held in six locations around the state in July, 2007. These were funded by the State Planning Grant to AKDHSS from HRSA as the USDHSS. The forums provided opportunities for staff and the State Planning Grant Leadership Team to obtain a regional perspective on existing health insurance coverage as well as needs of the uninsured in Alaska's six diverse economic regions. Forums were held in Ketchikan, Palmer, Nome, Fairbanks, Bethel, and Valdez.

The agendas for each forum were similar in that presentations by a regional panel were followed by a presentation of the ongoing work of the State Planning Grant by staff. After this, forum participants broke up into smaller work groups and brainstormed on solutions to the health insurance gap. Quite often the problems identified in the various regions were similar, while at the same time issues unique to the regions appeared.

A full report on the forums can be found on the State Planning Grant web page at: <http://www.hss.state.ak.us/commissioner/healthInsuranceForums/default.htm>

It's important to note that the problem geographic access to health care and access to health insurance are intertwined. Invariably discussion of one led to discussion of the other.

Concerns shared across the state included:

- The lack of health care providers who accept Medicare and Medicaid,
- Travel outside of rural areas for health care,
- More funding for Denali KidCare,
- A sliding income eligibility scale for public assistance programs,
- Lack of access to dental care in rural areas,
- Use of the emergency room for primary care by the uninsured,
- Reasonable and customary rates negotiated and paid by insurance companies are not correct for Alaska, and
- Cost shifting by medical organizations is hurting those who do have insurance.

Core principals shared across the state included:

- Everybody should have health insurance,
- Equal access to health care for all people,

- Health care is a human right, and
- There needs to be personal accountability for health.

Solutions proposed in all regions:

- Increase community awareness of good health practices and health care,
- Greater access to preventive care,
- A portion of the PFD should go to help cover health insurance,
- Taxes should be raised to help cover the costs of insurance,
- There should be a universal health care system,
- There should be incentives for people living healthy lifestyles,
- Increase recruitment for health care providers, and
- Provide state funding for Community Health Centers.

Regional Perspectives

While the diverse regions of Alaska were unified in their concerns and solutions, the regional forums also revealed concerns unique to each region.

Southeast Region

In Ketchikan and elsewhere in Southeast the high number of seasonal employees at fish processing plants presents a challenge.

In labor negotiations between Sitka and its police department health insurance was used as a bargaining chip on lieu of a wage increase.

In Southeast Alaska's roadless communities travel expenses for specialty care became a concern.

Other concerns that came out of the Ketchikan forum included:

- Lack of appointment availability to see a doctor;
- Making access to health care for children a priority;
- Tort reform to bring down health costs;
- More education about the benefits available through health insurance;
- A lack of Medicaid coverage for trips to the dentist (that trip to the dentist may require travel).

Anchorage/Mat-Su

At our Palmer forum a lot of people from Anchorage were able to attend. We had the opportunity to learn about programs unique to Anchorage, including Anchorage Project Access that serves those whose income is near the federal poverty level.

Concerns from the Mat-Su Valley included:

- The economic drain caused by providing health insurance;
- Increased demands to provide services are not being funded;
- The elderly finding physicians who accept Medicare;
- The majority of employers in the Mat-Su valley are small businesses. They are the ones who are providing the jobs for the people, but the employers can't afford the health costs either;
- Medical providers are concentrated in the urban areas.

Solutions offered included

- Encourage employee wellness programs,
- Create a health endowment that everyone would contribute to,
- Community Health Centers are an effective model for providing health care. Establish community health care centers with sliding fee scales.

Northern Region

The Nome forum focused on the health insurance needs of seasonal populations that include fishery workers, mining workers, construction workers (some have insurance, some don't), miners on the beach, in-home providers (day care providers), arts and crafts producers who work out of their homes, and other small businesses.

The state sponsors an insurance program for political subdivisions, which is how some of the smaller city governments with only a few employees can have insurance. Why can't this program be offered for small employers? The risk is already been spread out because there are more people in the plan.

Mental health services are inadequate due to sporadic availability of providers, and limited insurance coverage. Contract health services won't cover mental health and inpatient treatment for mental health for adolescents not covered. Sadly, this is a crucial issue in the region because of the high rate of suicide among adolescents and high substance abuse rates.

Interior Region

Clearly the fastest growing population in Fairbanks is the elderly population and the Medicare population continues to grow. There are significant challenges in Alaska in regards to reimbursement rates for Medicare and Medicaid. It creates access issues

because as the reimbursement rates decrease, more and more providers are opting not to accept Medicare or Medicaid.

The Fairbanks School District has developed a wellness plan in which employees receive incentives for participating in health initiatives.

Southwestern Region

The forum in Bethel illuminated Southwest Region concerns that include a language barrier for those for whose second language is English. This creates a problem for people trying to understand their benefits.

Three quarters of people in villages are unemployed. If they aren't eligible for Medicaid, they aren't able to travel into the village, or have huge expenses associated with travel.

Community based mental health services are needed for returning National Guardsmen.

There should be a community mileage account established for people to donate mileage for those who really have a need to travel for medical purposes.

In an area where many have multiple employers during the year, some means of managing and coordinating health benefits is needed.

Gulf Coast Region

Valdez Native Tribe is given a certain number of dollars to cover the population for the full year. Those resources are exhausted by May. There aren't resources in the community (providers or funding) to see all of those who require medical care throughout the year.

It's difficult to recruit and retain medical providers, including nurses and other providers for the community.

Those who participate in the fishing industry often can't afford health insurance.

