DON'T LET THE DRAMA HIDE WHAT'S AT STAKE

ealth reform has provided great political cinema. If produced by Hollywood, it might open with President Harry Truman proclaiming the need for urgent change in 1945 followed by a rapid succession of presidents, each saying *he* would be the one to finally fix our broken health care system.



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Before arriving at the drama that took place in Washington last year, the movie would show other highlights of this long battle, like Harry and Louise infamously trash-talking the Clinton reform bill until it suffered a bruising defeat some 15 years ago.

This might all be very entertaining political theater were it not for the high stakes of the

production. Interesting as the dramatic twists and turns might be, this particular film has real meaning to real people — and to our entire society.

I do not need to recount here the reasons for health care reform. By now we are all more than familiar with the problems in our system — from the uninsured to cost challenges to shortcomings in quality and coordination. In fact, so much attention is paid to these issues that we often lose sight of the bigger picture: a health care system that promotes the common good, builds strong communities and protects the dignity of all who live in them.

This big picture is really important but rarely discussed. In Washington especially, we have become all but obsessed with the details of legislating and building consensus and combating misinformation. The result has been a shift of focus from shared, long-range goals to the conflictual, day-to-day minutiae of policy and politics.

The media, partial to a good shoot-'em-up, highlight what divides us rather than what unites us. The coverage most people see is all about tension and conflict, which makes health reform seem scary or harmful when its fundamental goal is quite the opposite — to alleviate fear and suffering.

As I write this column, health reform is still a way off. The Senate has yet to pass a bill, and presuming it does, there is still the Senate-House conference committee to reconcile the two chambers' proposals, as well as final passage on both sides of Capitol Hill.

Even if we are ultimately successful at significantly expanding access by legislation, we will always need to improve the system and keep the national dialogue focused on the shared values that should be at its core: the same values named in CHA's Vision for U.S. Health Care, which include justice, the common good and stewardship.

Whether we find ourselves implementing recently passed legislation or pushing for a new round of reform or both, we should clearly call out the cost of failure as part of the effort to remind ourselves what is at stake here.

Some health policy think tanks have looked into the future to imagine the health care landscape we will face if current reform efforts fail. One report, published in November 2008 by New America Foundation and entitled "The Cost of Doing Nothing," provides an estimate of how much the economy loses as a result of premature deaths of the uninsured and their poorer health overall compared with those who are covered.

According to the foundation's report, in 2007 our economy lost as much as \$207 billion because of the poor health and shorter life span of the uninsured. In 2006, the average full cost of employer-sponsored insurance for a family was \$11,381 per year. Without reform, that figure soars

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to \$24,291 in 2016. The employee's contribution to the family premium would rise to \$6,401 in 2016 from \$2,890 a decade earlier.

This unsustainable growth in the cost of coverage has ripple effects across our economy as people have fewer discretionary dollars available and thereby spend less to fuel that economy.

"The recent financial services meltdown has led some people to suggest that we cannot afford health reform and that fixing our broken health care system will have to wait once again. But waiting comes with a price. The crisis worsens every day we do not act," the New America Foundation report concluded.

Another report, published last October by the Robert Wood Johnson Foundation, estimated that without reform the number of uninsured people would increase by more than 30 percent in 29 states and by at least 10 percent in every state over the next 10 years. Businesses in 27 states would see the cost of their insurance premiums double. Meanwhile, according to Robert Wood Johnson, if reform fails, far fewer people would get coverage through their jobs and the amount of uncompensated care would increase twofold in at least 45 states.

If we expect our health care system to effectively serve future generations, we must not allow these predictions to play out. No matter how dramatic and action-packed it might be, this is one movie none of us can afford to see made.

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Shared Statement of Identity For the Catholic Health Ministry

e are the people of Catholic health care, a ministry of the church continuing Jesus' mission of love and healing today. As provider, employer, advocate, citizen bringing together people of diverse faiths and backgrounds— our ministry is an enduring sign of health care rooted in our belief that every person is a treasure, every life a sacred gift, every human being a unity of body, mind, and spirit.

We work to bring alive the Gospel vision of justice and peace. We answer God's call to foster healing, act with compassion, and promote wellness for all persons and communities, with special attention to our neighbors who are poor, underserved, and most vulnerable. By our service, we strive to transform hurt into hope.

As the church's ministry of health care, we commit to:

- Promote and Defend Human Dignity
- Attend to the Whole Person
- Care for Poor and Vulnerable Persons
- Promote the Common Good
- Act on Behalf of Justice
- Steward Resources
- Act in Communion with the Church

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