

## SSU Health Care Crisis Work Group Meeting Notes of 3/2/04

Attending: Becky Cohen, Susan Herring, Skip Robinson, Richard Zimmer

Notetaker: Jessica Froiland

Call to order 12:08 PM

Informal Discussion

- Savings Potential, referred to as Functions on the To Study handout, for example spend money on actuaries from Sacramento.
- Humane cost containment means you cannot diminish the benefit while bring expense down.
- There are 10-20 areas where we could lower health care costs if various plans were implemented.
- A group of people with expertise will report tentative findings at spring conference. (Morning session?)
- Follow-up fall conference (if we receive foundation funding); this conference will be an actuarial conference.
- Be more targeted in getting people in stakeholder groups to come in to morning session.
- Afternoon session: two different configurations with stakeholder groups at first half of afternoon session. Mix groups up for the second half of afternoon session.
- Post synopsis of each main speaker on web a couple of weeks before the conference. Also have Blaise put information in the Press Democrat. Provide an opportunity for people to do homework before they come to the conference.
- Identify senior leaders in each stakeholder group. Have them do outreach within own stakeholder cluster in advance of the conference.
- How will we measure success on each front? Discussion of different scenarios ensued, e.g. with or without funding. Three facets of success identified: 1) lowering costs/feasibility (math, etc) and show numbers; 2) getting people to implement changes; 3) actual success by parties in moderating requested rates.
- May need to set up a one-day conference separately to work with labor unions and collective bargaining.
- Stakeholders hopefully will negotiate with own health care plans.
- Institutions band together to negotiate with health plans for coordinated set of changes along the systematic criteria established by conference efforts. Ex: Bob Shirrell is the representative for 40+ companies: a multi-employer plan. Get with the one for the city; get with the one for the county.
- Need to get to coalition of largest employers/businesses in the county that have in place a system for negotiating with health plans.
- Invite private sector sources of funding to conference, ex. Private insurance brokers. Skip has some experience doing this kind of work with a coalition of 300 non-profits (in the 1980s) and was successful in cutting premiums and slowing inflation.
- How to show progress at the end of the spring conference; what has been accomplished? Suggest: survey. Also have people commit to the fall follow-up conference to continue to increase dialogue.
- At the fall conference: what was difficult about the spring conference? What help was needed? What expertise is needed that the university can provide?
- Susan's class, Statistical Computing, is working on estimates of what is going on in the county, percent insured, etc. Susan asked Skip to pay a visit to the class to answer questions.
- Becky reported that the library website is coming along. Look at "Papers and Links" link and provide feedback. Anything missing? Gaps?
- Richard remarked that Maureen Middlebrook has a copy of a survey done by the health part of the Chamber of Commerce a couple of years ago, which may be useful.
- Alternative health care office in Washington, DC.....website? Native healing, Eastern approaches, etc. Kaiser collects data on "alternative" healthcare. Ask to see it.
- Kaiser's own research indicates that 60% of people coming to clinics have psychosomatic illness, not "real" illness. Also speeding up doctors' rate of seeing clients.
- Plan design: incorporate East/West techniques and philosophy from angle of more effective (fewer side effects, etc.), more humane, save money, patient faith in care...include outpatient psychotherapy in plans (restore it).