CONSENSUS STATEMENTS From Post Town Hall Programs 90th Town Hall

In programs held around the state to follow up on the spring Town Hall on Health Care, audience members were asked to participate in a mini Town Hall discussion. The question posed was: What can we, the people in this room, do to improve health care in Arizona? Consensus statements prepared from these discussions are set forth below.

YUMA (August 28, 2007)

First, the term universal health care needs to be defined so that everyone can start with a basic understanding of the terms under discussion.

There is a shortage of health care professionals. Having nursing stations and nurse practitioners with their own offices could be one way of addressing provider shortages. We should also expand the ability of school nurses to provide additional care to students and ensure that each school has their own nurse or nurse practitioner. If necessary, we need to support changing our laws to support this kind of structure.

We also need to lobby our legislators and government to provide a tax base to cover all those who don't have insurance. Tort reform would make a difference.

Finally, we need to realize the impact of mental health on the cost of traditional health care.

TUCSON (August 29, 2007)

We need to engage in long-term planning. However, in the short term, we need to support ACCCHS, Health Care Group and others, and we need to facilitate enrollment in these programs. We need to be very local and let congress know that SCHIP should not be limited or reduced. Rather, it should be expanded.

We also need to devote more time and energy to electronic health records. Many people who use emergency rooms could be better and more economically served at clinics. We should make efforts to expand the use of clinics and make them more accessible.

To better educate people about health care, and reduce costs of emergency care, it is important to have neighborhood and school-based facilities where people can walk in and receive health care before it becomes a crisis.

New models of care should also be explored where we can better measure the impact of preventative care and traditional methods of care.

With respect to provider shortages, the loan repayment program is very effective. However, there is not enough funding in this program. We need to encourage the legislature to better fund this program.

We need to be concerned that Health Care Group does not turn into a high risk pool. We need to address the cost of health care and understand the actual cost and cost savings of any suggested policy changes.

Finally, we should all hug a nurse.

SIERRA VISTA (August 30, 2007)

We can continue to gather information from community assessments about access, funding and other community needs for improving health care. Then, we need to prioritize and determine what would make the most impact. We need to then communicate this information to First Things First and others.

Recruitment of health care personnel must also be a priority. To provide proper health care we need to have a proper health care workforce.

Electronic medical records would allow for tremendous improvements. We need to start with obtaining the infrastructure to support such a system. We also need to ensure that the various systems will be able to interface properly with each other.

Cochise College is working on helping to provide a full range of health care providers for the community but we all need to work on keeping these students, who are often recruited to more metropolitan areas.

Focusing on wellness and prevention is also a way that we can all help to improve health care. Most of our health care dollars are spent on chronic illnesses. The money spent here could be reduced with more focus on education and prevention. For example, employers should be encouraged to reward employees for healthy behaviors. Programs located within the schools are also very effective in creating healthier children. We should support these types of programs.

DOUGLAS (August 30, 2007)

We can improve health care in Douglas by attracting more family care practitioners. One method for attracting health care providers is to have local educational programs for health care professionals as it encourages them to stay in the area. We should also have more incentives such as tax rebates and incentives for health care providers to stay here once they complete their education.

A more holistic approach among community and business leaders and health care professionals would substantially improve health care. Specifically, we need to work with city councils, school systems and elected officials to create an overall approach. One way to accomplish this might be to coordinate a community forum to bring people together and reduce the fragmentation that currently exists and to create some focused goals that can be worked on together.

Having more school-based programs would have a significant impact on improving health care for our children. School-based programs provide a wonderful opportunity for preventative measures that ultimately reduce health care costs. This would also encourage parents to be more involved in the schools.

With respect to incarcerated youth, we need legislation to have continuous and consistent coverage of their health care needs.

PHOENIX (September 7, 2007)

Health care reform is a leadership issue. We all need to be leaders in the hard work of moving health care reforms forward. We need to contact and engage our legislators, neighbors, businesses and other organizations to be a part of this discussion. Just within our individual organizations, we can educate each other and perhaps even provide medical screenings.

We should develop a template based on the Town Hall recommendations for use with outreach efforts – both individually and globally.

We should also explore the concept of statewide health fairs around the state to reach areas of need in the rural areas.

To better control costs, we should empower individuals to be responsible for understanding health care costs.

Qualified school nurses make a big difference in early access and prevention. We should strive to have a qualified school nurse in every school. Expanding nursing programs so that they are statewide may also be a way to improve health care throughout the state.

Personal responsibility for health and wellness is critical as well and we need to educate consumers about their medical records and encourage the use of electronic records.

Standardized protocols at hospitals related to patient safety will improve health care as will expanded education on patient safety issues. The internet and the use of technology can be better utilized to improve efficiency and quality of care. We should take advantage of the internet to get information out to people so they can learn about these issues and become more engaged in improving health care.

Finally, preventative care for children could have a big impact on future health care costs – whether it's teaching them about healthy eating or enrolling them in KidsCare.

SCOTTSDALE (September 11, 2007)

We need to offer incentives to health insurance companies to provide health care regardless of preexisting conditions (also discussed as guaranteed issued with community ratings). While this was the most contentious issue at the Town Hall, it was nonetheless approved by a majority of those in attendance.

Insurance companies believe that the concept of guaranteed issue with community ratings may raise insurance rates. They propose that a high risk pool may be a better way to address the insurance coverage gap. In the interim, different types of health care pools could have an impact now. Mandating universal enrollment in health care insurance plans might also be a way to accomplish these goals. Mandating enrollment would have a tremendous impact on Native American populations as well and could help to reduce emergency and other costly medical care.

In a move towards universal coverage – however it may be obtained – it is important to have a screening component in place for preventative measures. We should also consider non-traditional methods of providing health care.

Our legislators do not always take the time to address the complicated issue of health care. Everyone in this room should contact their legislators and encourage them to address health care in this upcoming legislative session. Grassroots discussions and actions can make a big difference.

With any of these efforts, it is important to encourage personal responsibility and transparency of costs. Primary physicians, brokers or other patient representatives are methods for helping health care consumers navigate the complicated health care system.

Interestingly, when the stakeholders in health care are not a part of discussions on health care reform, the conclusion is generally that we need to have universal health care funded by taxes combined with some personal financial responsibility.

FLAGSTAFF (September 12, 2007)

We can improve health care by providing equal access to any willing provider. We can do this by putting pressure on insurers similar to what ASU did with Blue Cross Blue Shield.

Investing in prevention and wellness programs especially with children would improve health care as would encouraging personal responsibility for wellness. As an educational institution, NAU should continue to invest in those providers who focus on health prevention and education.

For outlying areas, like Page, we should find ways to bring more services to these areas and strengthen relationships between the universities and area clinics.

Arizona has the second worst oral health in the nation. We should keep oral health – especially prevention efforts in the schools – a central part of all health care efforts.

Finally, we must change the political will of our elected representatives and others so that they will implement measures that many groups agree must occur. This can be accomplished through building coalitions and becoming more active and vocal about changes needed in health care policy.

GLENDALE (September 13, 2007)

Taking personal responsibility for our own care is critical for improving health care.

We should also compare our state health care systems to other states, such as Hawaii, that have been recognized for having good health care.

Education on health care is essential. This education should include education on the availability of health care insurance.

Because the costs of insurance are rising rapidly, we need to address, in conjunction with these educational efforts, a way for more individuals to obtain and pay for health insurance – especially when they cannot receive it from an employer-based plan.

Education efforts should also include: the need for self-responsibility, healthy lifestyles, preventative measure, and a better understanding of the complications involved with end-of-life issues.

Opening up discussions at a grassroots level will provide a better understanding of problems in our current system and may help provide the political will for our elected representatives to make meaningful reform.

MESA (September 19, 2007)

Many in our uninsured population are eligible for health insurance. We can help reduce the uninsured population by informing them of opportunities for insurance. We can also partner with groups that assist the disabled population to better meet their needs.

Becoming more informed about ideas that may seem out of our comfort zone is important for crafting meaningful solutions.

We need to approach solutions by looking at complimentary roles for public and private entities, including mandatory enrollment with the goal of universal coverage, community rating, guaranteed issue and uniform benefits.

As part of this effort, we need to define what a "basic" level of health care should be.

Finally, we should all support legislation that supports the 10 primary recommendations of the Town Hall, and regulatory and statutory changes that will help streamline the provision of health care.

KINGMAN (September 25, 2007)

When looking to address health care issues, we need to make the industry more competitive. There should be more transparency with costs so that we do not just shift this burden to future generations.

Taking responsibility for our own health is also important. This should start with local efforts in schools. We need to better educate our children about how to live a more healthy lifestyle. However, this effort should move beyond children. It should also include adults. We may want to consider a health care system that includes accountability for unhealthy decisions such as smoking.

Attracting and retaining health care professionals to our local communities also needs to be addressed to improve health care for Mohave County.

The impact of undocumented immigrants is largely unknown. Efforts to resolve this issue and to better understand the impact of immigrants on our health care system need to be made. Some are concerned that providing health care to undocumented immigrants will just add another incentive for illegal immigrants to come to the United States. Others feel that something is wrong with our health care system when U.S. citizens go to Mexico because they can't afford health care and pharmaceuticals here in the U.S.

A city- or county-wide task force that includes educators and health care professionals may be one method of researching methods for improving access to care and the quality of health care in Kingman and Mohave County. Among other issues, this task force and others should consider how to reduce the number of people who seek non-emergency care in emergency rooms. Effective examples from other emergency rooms should be explored including the concept of fast tracking and deferring non-emergency patients.

We also need to consider tort reform and hold people responsible for their own actions that lead to health care issues.