Siuslaw News
P.O. Box 10
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Opinion

The First Amendment

Congress shall make no law respecting an establishment of religion or prohibiting the free exercise thereof; or abridging the freedom of speech, or of the press, or the right of the people peaceably to assemble, and to petition the Government for a redress of grievances.

The future of tradional Medicare?

GUEST VIEWPOINT

ARNOLD BUCHMAN
RETIRED HEAD OF LEGAL SUPPORT FOR CIGNA HEALTHCARE'S WESTERN DIVISION

The future of healthcare coverage should be of particular interest to Florence's significant number of Medicare enrollees. While the latest proposal to repeal and replace the ACA has failed, all indications are that conservative policy makers still want to replace government-provided traditional Medicare with free-market, profit-based Medicare Advantage.

Conservatives contend that free-market principles of competition and profit will provide choice and efficiencies.

Medicare Part C — Medicare Advantage — allows private health insurance companies such as HMOs and PPOs to contract with CMS, The Centers for Medicare and Medicaid Services, to provide Medicare Part A and Part B benefits and, sometimes, Part D prescription drug coverage.

Unfortunately, selling health care isn't like selling cars or clothing. As economists point out, people don't know when they will get ill. It can be cripplingly expensive when they do, treatment choices can be bewildering and insurers have a profit incentive to avoid providing policies to those most at risk.

Medicare Advantage plans, structured by private insurers, will often include eye and dental care, along with benefits such as gym memberships, as well as fill gaps in coverage that with traditional Medicare are filled by so-called Medigap or supplemental insurance — all typically for lower out-of-pocket costs than traditional Medicare.

In exchange, members must use in-network doctors and hospitals, the composition of which may be problematic for a given individual, especially one coming to need specialized treatment.

Like all third-party payers of medical benefits, Medicare Advantage reimburses providers on the basis of procedure codes.

Medicare Advantage codes include a "risk score" code designed to pay them higher rates for sicker patients. According to the nonprofit, non-partisan Center for Public Integrity, manipulation of this code resulted in nearly $70 billion in "improper" payments to Medicare Advantage plans from 2008 through 2013.

Attempts by CMS to correct this continuing drain of tax dollars have been unsuccessful.

The result?

Ongoing costs from Medicare Advantage mistakes, abuse and fraud in the billions exceeding estimated traditional Medicare costs.

By increasing eligibility age, AHCA would have attracted younger and healthier seniors from traditional Medicare to Medicare Advantage. This would instantly shrink the risk pool to a higher proportion of more costly older members exacerbating higher cost-sharing in a smaller risk pool.

Proposed premium support vouchers would encourage enrollees to shop among competing "free market" Medicare Advantage policies.

Because traditional Medicare premiums and out-of-pocket costs are geared to total Medicare payments, the stage would be set for an insurance death spiral and the end of traditional Medicare.

Sweetening "free market" Medicare Advantage would sour "socialized" traditional Medicare, leaving the older and less healthy enrollees without the safety net that traditional Medicare now provides.

Something to keep in mind while debate continues about future proposals to refom the ACA and Medicare.

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The Siuslaw News welcomes letters to the editor as part of a community discussion of issues on the local, state and national level.

Emailed letters are preferred. Handwritten or typed letters must be signed. All letters need to include full name, address and phone number; only name and city will be printed. Letters should be limited to about 300 words. Letters are subject to editing for length, grammar and clarity. Publication of any letter is not guaranteed and depends on space available and the volume of letters received.

Libelous, argumentative and anonymous letters or poetry, or letters from outside our readership area will not be published.

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Election-related letters must address pertinent or timely issues of interest to our readers at-large.

Letters must 1) Not be a part of letter-writing campaigns on behalf of (or by) candidates; 2) Ensure any information about a candidate is accurate, fair and not from second-hand knowledge or hearsay; and 3) explain the reasons to support candidates based on personal experience and perspective rather than partisanship and campaign-style rhetoric.

Candidates themselves may not use the letters to the editor column to outline their views and platforms or to ask for votes; this constitutes paid political advertising.

As with all letters and advertising content, the newspaper, at the sole discretion of the publisher, general manager and editor, reserves the right to reject any letter that doesn't follow the above criteria.

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