

University of Miami School of Business
Business of Health Care
Altman Keynote
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Closing Keynote: "Current and Future Health Care Political Climate"

One of the conference highlights was a closing keynote discussion on the "Current and Future Health Care Political Climate" between Professor Donna E. Shalala, former University of Miami president and former U.S. Secretary of Health and Human Services, and Drew Altman, president and CEO, the Henry J. Kaiser Family Foundation, on the future of health care policy.

Altman, who writes frequently on health care issues, opened the conversation by thanking UM conference organizers for their comprehensive approach to issues. "We don't connect the dots often enough in our field," he said. "Those of us in policy, don't know that much about business, and vice versa. Bringing us all together for the day was a great approach."

Shalala's first question was whether U.S. Rep. Paul Ryan's recent retirement announcement would affect health care policies in the House, where Ryan is the majority leader. "With or without Ryan, House Republicans have been looking at how to transform Medicaid and Medicare as part of the effort to repeal and replace the Affordable Care Act (ACA)," he said. "That issue is now part of the discussion of entitlements relating to welfare reform."

Altman pointed out that Medicaid, together with the Children's Health Insurance Program (CHIP), covers more than 70 million Americans, including the disabled. He added that the ACA proved to be more popular than the Trump administration thought. "Polls show Medicaid to be a popular and resilient program, and I don't get the sense that Republicans gave a great appetite to climb that hill again," he said.

But the differences over health care policy on a national and state level reflect deeper divisions in U.S. society, Altman said. "Is Medicaid an insurance program for people in need or is it a welfare program subject to issues like drug testing or lifetime reimbursement limits?" he said. "When Americans think of Medicaid as welfare, they are more likely to favor cuts, but if they consider it as health insurance, they are more likely to protect it."

Next, Shalala asked Altman about U.S. consumers – the people who pay the bills for insurance and health care. "One of the surprising things we discovered through our polling in 2017 was that repealing the ACA was dead last as a priority for consumers," he said. "Despite all the talk about repeal and replace, consumers put their pocketbook concerns – premiums, deductibles and drug costs – at the top of the list."

Even in focus groups with Trump voters, the ACA was not that important, Altman added. Instead, they were worried about paying their medical bills, including “surprises that they thought were covered by insurance.

“We have been so focused on the ACA that we have missed something bigger,” Altman said. “There has been a quiet revolution in health insurance toward less comprehensive coverage, along with higher premiums and deductibles at a time when wages are relatively flat. As a result, 31 percent of those we polled reported real problems in paying their medical bills, even though the one thing insurance should do is help people who are sick.”

Asked about the implications in terms of health policy, Altman said the high cost of care is a “big tent” issue that affects Democrats and Republicans and applies to people with and without insurance. “People are putting off care because they can’t afford it,” he said. “If they get treatment, they may have to take a second job, borrow from friends or run up their credit card balances. That creates both financial and emotional stress in the family.”

What drives voters?

Shalala then asked if there is a difference between the top issues covered in a presidential or mid-term election campaign and what actually drives peoples’ votes. Altman said voters develop perceptions of the individual candidates, as well as their positions on issues. “With 50 million voters participating in marches for women’s issues, health care coverage and against gun violence, the energy in politics has flipped from the right to the left,” Altman said.

But Shalala then wondered if repeated attacks on the press from the Trump administration and allies were having an effect on voters’ attitudes toward health care policy. While attacks on the media are “a profound concern for all of us,” Altman said there are positive signs as well. “The failed effort to repeal the ACA was largely due to the facts and evidence reported by the news media, such as publishing the CBO (Congressional Budget Office) report on the financial impact of those actions.”

Altman added that simply reporting both sides of an issue without comment, many print, broadcast and online publications are also saying, “Here are the facts, or that statement was a lie.” That’s a big change for the media, he said.

Asked to reflect on the past year in Washington, Altman said the debate over the ACA and the health insurance marketplace is far from over. “We need to discuss as a nation whether we look at health care as a right or a privilege,” he said. “Do we want healthy people in the same pool as sick people, or should we have a high-risk pool for people with medical conditions? Do we shift coverage for the poor to the states or do we have a national responsibility to care for everyone? Those health care decisions will have a tremendous impact on Americans.”