



Wisconsin Medical Society

Your Doctor. Your Health.

For Immediate Release

For Information Contact:

Steve Busalacchi

(608) 442-3746/800-762-8977

Cell (608) 576-2274

Steveb@wismed.org

Cost Controls Central to Health System Reform Plan

Society's phased-in strategies include defining a "standard benefits" plan
Read entire report on wisconsinmedicalsociety.org

Madison (March 19, 2003) –After seven months of work, the Wisconsin Medical Society unveiled a phased-in plan that leads to affordable, high-quality health care coverage for every Wisconsin resident. The final report comes after the Society's 37-member task force heard input from groups representing labor, business, insurance, education and health care.

“Our goals are to help control medical costs without jeopardizing the quality of care, and make health insurance available for everybody,” says Robert Phillips, MD, Chair of the Society's Health Reform Task Force. “It's a staged, realistic approach for providing health insurance at a reasonable price,” added Dr. Phillips, who practices at Marshfield Clinic.

“The Society's proposal recognizes that our health care system is under tremendous pressure, and the best way to relieve it is to implement these ideas for cutting costs while maintaining high quality care,” said Steve Brenton, President, Wisconsin Hospital Association, and member of the task force that developed the report.

These are among the numerous strategies outlined in the report:

Standard Benefits Plan: Create a tax-exempt “standard coverage package” that not only includes treatments supported by best practice guidelines, but also emphasizes preventive care. Additional benefits beyond the standard plan would be considered taxable compensation, thus discouraging costly and unnecessary coverage.

Pay or Play: Coverage for every resident can be achieved by moving toward a system where employers must offer either the “standard” benefits package or pay a tax to support health insurance for their workers.

Patient Co-pays: Eliminate co-pays for preventive care and require them for non-emergency, urgent care. Treating illnesses early on saves money because advanced conditions are costly to treat.

Create “market basket” of common medical services: Publish the dollar amounts charged for typical physician services at clinics. Employers and other buyers of insurance could then compare health plan charges for the same “market basket.”

Quality of Care Data: To respond to payers’ desire for the highest quality care at the lowest price, collect data that answers insurance buyers’ specific questions. Generally accepted, evidence-based practice guidelines and quality of care standards are the yardstick by which quality can be measured.

The Wisconsin Medical Society is the largest association of medical doctors in the state with more than 9,500 members dedicated to the best interests of their patients. With that in mind, wisconsinmedicalsociety.org offers patients a unique source for reliable, physician-reviewed medical information. The Wisconsin Medical Society, a trusted source for health policy leadership since 1841. Your Doctor. Your Health.

XXX