Workers' Comp Insider

Health Wonk Review's Look to the Future Edition

By Julie Fergusson January 19th, 2012

We're delighted to be hosting Health Wonk Review this month. In looking for a potential theme, we turned to "the Googles" to see if January was noteworthy for any special commemorations beyond Martin Luther King day. Well buckle down because it looks like we will all be very busy. January is apparently train-your-dog month, radon awareness month, "get organized" month, crime-stoppers month, budget month, cervical health awareness month, closet organization month, mentor month, beer month, pet registration month, anti-human trafficking month, tuna month, pork month, and more - we're sure we've missed some and we're exhausted already.

We've decided to go with beer month (as we wrote this last night) and a turn to the classics: January is named after Janus, the ancient Roman god of the doorway. Janus is generally depicted as a two faced god, with one face looking to the past and one to the future. Here on Health Wonk Review, our last issue included some recaps of the prior year, so in this issue, we are looking to the future and what the coming year might hold for healthcare.

Reading the tea leaves

Since our last issue, several of our intrepid wonks have proffered prognostications for the coming year. First up is Joe Paduda at *Managed Care Matters* who offers his <u>workers' comp predictions</u>, which are expansive enough to encompass not one post, nor <u>two</u>, but <u>but three</u> - and if he is right, it looks like it will be a busy year in the occupational medicine arena.

At *The New Health Dialogue Blog*, Joe Colucci notes that the <u>countdown to the SCOTUS ruling on the Affordable Care Act has begun</u>, and weighs in with prognostications about how the constitutionality challenges are likely to fare.

At *InsureBlog*, Bob Vineyard looks ahead at the future of healthcare, finding <u>some things you</u> won't get on the 6 o'clock news.

The devil-some details

While some of our posters are looking at the broad trends, others are looking under the hood. As the saying goes, the devil is in the details.

At *Health Affairs Blog*, Timothy Jost <u>examines the first set of Supreme Court briefs</u> filed in the challenge to the ACA, including the U.S. government brief defending the constitutionality of the minimum coverage requirement, aka individual mandate.

At *Health Care Renewal*, Dr. Roy Poses takes a bipartisan look at the <u>presidential candidates and their financial relationships with large health care organizations</u>, wondering whether any of them would be inclined to advocate for health reform measures that might threaten the interests of these organizations. He notes that some of these relationships appear significant enough to be called conflicts of interest in arenas other than the political one, yet none of the candidates has made a point of disclosing these relationships as potential conflicts.

Louise Norris of *Colorado Health Insurance Insider* examines some of the potential reasons why claims expenses in Colorado's new high risk pool are double the national average. She points out that, "pre-existing condition exclusion riders have all but disappeared in the individual health insurance market in Colorado. Nearly all carriers now use underwriting rate increases instead."

On the eponymously named *John Goodman's Health Policy Blog*, John examines barriers that physicians face in pricing and packaging their services in a post entitled <u>How Doctors are Trapped</u>.

David Williams of *Health Business Blog* looks at <u>Medicaid expansion and questions if we will</u> we get our money's worth. He notes that as more diabetics are added to the rolls, their out of pocket costs will fall. But overall costs will rise steeply and it's unclear whether outcomes will improve.

Healthcare Economist Jason Shafrin investigates <u>how Medicare's physician value-based</u> <u>purchasing scheme will work</u>. He notes some of the challenges involved in evaluating physicians for quality and cost.

Brad Wright is looking sharp at his newly designed blog, *Wright on Health*, where he offers <u>an</u> <u>overview of the Independent Payment Advisory Board</u>, the mechanism created by the Affordable Care Act to deal with growing Medicare spending. He looks at how it works, as well as what it can and cannot do.

Gary Schwitzer looks at senior health care policies from another perspective. He earns his *Health News Watchdog* blog name as he digs up the truth about a <u>dishonest health care hoax intended to scare seniors</u> which has recently been making the rounds, including airtime on a national radio call-in show.

And for another angle on senior care, at *Health AGEnda*, Marcus Escobedo looks at the issue of <u>life expectancy and whether it should affect treatment</u>. His post discusses a new evidence-based website for predicting life expectancy among older patients, ePrognosis.org, and the debate surrounding its use.

On the technology front...

Primary care physician Jaan Sidorov believes the digitization of health care information will commoditize primary care. At *Disease Management Care Blog*, he examines the transport of information and the likelihood that, when it comes to routine medical problems, patients won't need to be seen by a physician in a traditional face-to-face visit.

Also on the healthcare technology front, Dr. Michael Koriwchak has a post a *Healthcare Talent Transformation* where he takes a closer look at the "enthusiasm gap" between Health IT startup companies and physicians and opines about some of the <u>reasons for barriers to adoption</u>.

Closing thoughts...

At *Corporate Wellness Insights*, Kat Haselkorn reminds us that wellness can be a good investment with a good ROI, and that <u>ignoring workplace wellness is as risky as gambling</u> because no employee is immune to illness or injury.

Here at *Workers Comp Insider*, we point you to our piece on <u>How Doctors Die</u>, recounting a thoughtful article by a physician who notes that, "What's unusual about them is not how much treatment they get compared to most Americans, but how little."