

Local communities have a dog in the health care fight

I was thrilled by the opening commentaries in the October 19, 2017 issue of JAMA. Nearly 10 years after publishing my book, “De-Spamming Health, Reforming the Health System from the Bottom-Up”, top researchers and policy wonks appear to realize that if we are to escape the deadlock, and truly reform health care, it must start at local communities.

Although they still appear unsure “how” this can best occur and “who” should drive the process, they finally realize we cannot continue down the pathway of unfettered federal spending directed at individuals, health care institutions/ providers and non-government organizations (NGOs) that operate within the unique health systems of thousands of communities.

“Addressing Population Health: Integrators in the Accountable Health Communities Model” by Alexander Billioux, MD, DPhil; Patrick H. Conway, MD, MSc; Dawn E. Alley, PhD and “Global Budgets for Safety-Net Hospitals” by Joshua M. Sharfstein, MD; Sule Gerovich, PhD; David Chin, MD in October 19, 2017 JAMA describe models, approaches and challenges directed at increasing the effectiveness, efficiency and quality of health care – and improving health status –within communities.

Although, in my opinion, these models are overly concerned with “top down” design and regulations, reimbursements, health institutions and providers (which consume 80% of health resources but only determine 20% of health status) - and not enough with the local governance, authorities, mechanisms and resources dedicated to health system management in local communities - it is a start.

Through entitlements, grants and other means the federal and state governments provide about 50% of health resources in most communities and, in return, enjoys a constant cacophony of individuals, advocacy groups and lobbyist stating they need more or people will die. That could be tolerated if the existing resources are employed to address top priority concerns, exhibit maximum productivity, operate with minimum duplication and waste and adequately address the social determinants of health. They are not, especially as concerns integration and sharing to keep individuals, especially the elderly, out of hospitals and clinics.

What was the last time the governance of a local community refused to endorse a grant request from one of hundreds of NGOs because it was duplicative, uncoordinated with other essential services or of low priority? When have they evaluated the effectiveness and efficiency of local health and social support institutions, hospitals, clinics and related services, as regards productivity, coordination and sharing? When have they actively engaged in analyzing the populations “slipping through the cracks” and devoid of basic transportation, nutrition, hygiene? That what reform is all about and requires authorities, mechanisms and resources that central levels are reluctant to share control – and local communities assume – as demonstrated by the failure of recent decentralization initiatives.

We treat health care as a child’s allowance paid by a central authority through parent donations. If the authority runs out of money, the children simply keep asking for more and are granted it, with parents asked to kick in more. The authority keeps coming up with guidelines and models to educate children on how to budget and spend wisely. However there are few consequences or incentives on the part of the child or parent to do so, until the parents run out of money. At that stage they have a choice to ignore the problem or take control by setting limits and/or assisting the child to spend her or his allowance prudently.

None of this is about families and communities who simply do not have the resources to pay for basic care. That is a political redistribution – not health – decision. It is about policy makers and community leaders realizing local communities must accept they have a dog in the fight and responding responsibly.

Copyright Notice – Copyright 2017 James D. Felsen, MD

Published in November 12, 2017 “Gazette-Mail”.