

Heaton honored

Nancy Heaton, executive director of the Foundation for Community Health, was recently recognized as a major contributor to the creation and success of the Community Health & Wellness Center of Greater Torrington. She was honored by the center's Board of Directors at an awards ceremony Dec. 9.

As a member of the center's founding team and one of the original board members, Heaton served as treasurer and as a consultant between 1998 and 2001. She was responsible for many of the center's startup tasks, such as gaining tax-exempt status, creating a mission statement and employee handbook and establishing an HIV clinic.

The Community Health & Wellness Center of Greater Torrington provides health care for anyone in northwestern Connecticut regardless of their ability to pay.

Health foundation director offers opinion on reform

Watching the legislative process tackle health-care reform over the past year has been fascinating. It seems to me that many people with whom I have never had a political discussion are talking about it. It is clear that health care, and how we access it, is important to each and every one of us and I am still amazed that Congress even decided to take on such an emotionally charged topic — finally.

Having run small nonprofit organizations for the past 18 years in northwestern Connecticut, I am well aware of the ever-increasing cost of health care for both the individual and the small business owner. Twenty-percent increases and more from year to year have not been uncommon during this time.

It was asked of me recently how I thought national health reform would impact the residents of the Northwest Corner of Connecticut and the greater Harlem Valley in New York. In considering this question, I needed to take a closer look at what is actually in the two bills which passed the House and the Senate and are now in conference. For those who are interested, the Kaiser Family Foundation has published an excellent comparison of the two bills at kff.org/healthreform/side-byside.cfm.

By all reports, both of these bills will increase the percentage of Americans covered by insurance to at least 95 percent through a variety of techniques and programs, including mandates, subsidies, credits and fines. In addition, they both include language to eliminate pre-existing condition exclusions as well as annual and lifetime caps on coverage. Other methods of expanding coverage include allowing dependent children up to the age of 26 to stay on their parents' insurance, expanding Medicaid eligibility and increased funding to Federally Qualified Health Centers like Hudson River in Amenia and the Torrington Health and Wellness center.

Most of these things are phased in with a goal of Jan. 1, 2014, being the date for the whole program to be in effect.

I will assume that a significant

number of local residents will be affected by one or more of these changes. While many already have insurance coverage today, the downward trend of the job market is likely to result in more people losing their employer coverage.

For local seniors, there are a number of provisions that affect Medicare, such as the shrinking of the "doughnut hole" and the removal of co-pays for preventive and screening services. They also may be phasing out federal subsidies of the Medicare Advantage plans, and changing how hospitals and other providers are reimbursed for their services.

There are also some provisions for supporting a variety of quality improvement and cost-cutting programs, for example: supporting comparative effectiveness research (i.e., reviewing what works and what doesn't work); grants to states interested in adopting and demonstrating the success of tort reform to reduce medical malpractice costs; promotion of prevention and wellness activities; and the creation of a voluntary fund to assist with long-term care costs. These and other efforts are less likely to have an immediate local impact.

The House legislation calls for developing a National Health Insurance Exchange, while the Senate legislation requires each state to develop such an exchange where these new insurance products will be sold. Assuming the Senate bill trumps the House on this latter issue, Connecticut at least is prepared to meet that challenge having spent nearly two years developing a state-based plan for increasing health-care coverage. This culminated in the passage of the Sustinet bill last session, which has already created a statewide body charged with acting on this federal legislation as soon as it is passed.

It will be very interesting to see what finally passes — whatever it is I am sure it will need to be improved upon in years to come.

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