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## Towards more accessible and affordable health coverage

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# **GEORGIA HEALTHCARE COVERAGE PROJECT**

## **Towards More Accessible and Affordable Health Coverage**

### **Assessing the Climate for Change in Georgia**

When the U.S. Department of Health and Human Services awarded Georgia a \$1.27 million State Planning Grant in 2002, the state was presented with an unprecedented opportunity to identify gaps in health insurance coverage among Georgians, barriers to coverage, and strategies to facilitate access to affordable coverage among Georgians.

Exploring opportunities to expand Georgians' access to affordable health insurance coverage could mean changing state laws, regulations, and the way that public programs are planned and administered. And it could mean new demands for tax dollars. *Is Georgia ready for such change?*

To answer that question, the Planning Grant Team engaged the public, communities, and key state leaders in a series of separate focused conversations. The goals of these conversations were to assess: a) the extent to which Georgians believe that access to affordable health insurance is adequate; b) how critical the problem of accessible and affordable health insurance is perceived to be; c) the criteria that any solutions to the problem should meet; and d) public and political will to tackle the issue.

#### **CONVERSATIONS WITH THE PUBLIC**

Twenty-one focus groups were conducted with citizens across the state by Georgia Health Decisions, Inc. Participants were carefully chosen to ensure that each focus group was composed of Georgians with similar demographic backgrounds and consumer behavior patterns and, further, that all demographic groups in Georgia were represented in one or more focus groups.

### **Conversations with Communities**

Four listening sessions for community leaders were conducted by Grant staff in localities selected for their geographic and cultural diversity and their relative rankings of aggregate economic strength. Participants were drawn from representatives of the business and economic development communities, healthcare providers, insurers and underwriters, philanthropies, community-based organizations, and elected officials.



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## Conversations with State Leaders

About 24 interviews with state leaders were conducted by Georgia Health Policy Center staff. Interviewees included elected officials, appointed officials and representatives of influential advocacy, membership, and industry groups.

Reports detailing the findings of each of these respective efforts were published under separate cover. This document synthesizes these findings and highlights both areas of agreement as well as variations in perspectives among the three groups.

## Do Georgians believe there is adequate access to affordable coverage?

The public, communities, and state leaders universally believe that the current patchwork of coverage products is both costly and inadequate. Particular issues of concern within each group of informants varied.

- **Citizens** believe that insurance premiums, co-payments, and deductibles are too expensive and are beginning to question whether the cost of coverage is worth the benefits.
- **Communities** feel that more uninsured residents have come to rely on safety net services offered at the local level because coverage by public and private programs is harder to secure.
- **State leaders** are concerned about the ability of employers to continue to offer health insurance benefits.

### Factors driving the problem

Cost-shifting generated by the uninsured and discounts negotiated by large group purchasers, along with insurance rating practices, malpractice liability issues, new medical technologies, prescription drug therapies, and the inappropriate utilization of services by some consumers are among the factors that all informants believe are responsible for the increasing cost of insurance and the decreasing mix of available products. However, the respondent groups diverge in the relative weights attributed to other factors.

- **Citizens** are more likely to believe that excessive profiteering or “greed” by insurers and providers is responsible for the high cost of healthcare.
- **Communities** are more likely to point to ineffective healthcare policy at the federal and state levels.
- **State leaders** are more likely to cite a lack of consensus at



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legislative and societal levels on whether there is a “right” to healthcare and, if so, the extent to which government should facilitate access to coverage and services.

## Views on the uninsured

All groups believe that the numbers of uninsured are growing and feel the increase is related to the spiraling cost of coverage and care.

- **Citizens** are more likely to believe that the uninsured are “people like us” who simply cannot afford to remain in the market. However, wealthier individuals are more likely to feel that the uninsured simply do not place a high enough priority on insurance coverage.
- **Communities** see the uninsured as those, like immigrants, who have fallen through the cracks of public programs and cannot obtain private group health coverage plans.
- **State leaders** are more likely to see the uninsured as “pockets” of racial and ethnic minorities, undocumented immigrants, and the working poor.

## How significant is the problem?

All groups agree that the challenges posed by a lack of accessible and affordable insurance are critical but differ in their assessments of the urgency of addressing those challenges.

- **Citizens** overwhelmingly feel that insurance coverage is a basic “kitchen table” issue that is forcing hard choices between health care and other basic needs. They believe that the need for solutions is urgent.
- **Communities** see the problem much as an “unfunded mandate” since emergency services must be rendered to those without coverage, despite the lack of revenue to offset the public and private costs of doing so. They believe that without action, every community’s safety net will soon collapse of its own weight.
- **State leaders** believe that the impact of the problem is ultimately an economic one for Georgia and, in particular, for its rural areas. However, state leaders believe that a slower and more deliberate approach will be needed to address the issue, and some are convinced the issue will not be addressed at all.

## How should Georgia frame solutions?

The public, communities, and state leaders are unanimous in their view that all stakeholders—insurers, providers, employers,



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government, and consumers—must share responsibility for crafting and implementing strategies to expand access to affordable health coverage. They also agree that an effective solution will require multiple strategies and should meet the following criteria:

- Facilitate access to quality healthcare throughout Georgia.
- Be fiscally responsible in its impact on tax dollars.
- Ensure affordable coverage to employers and working Georgians.
- Encourage the appropriate utilization of services by consumers.
- Emphasize prevention and early treatment of costly illnesses and conditions.
- Embrace and support public/private partnerships.
- Be politically acceptable and feasible.

## **Does Georgia have the public will to address the issue?**

All respondents share the conviction that taking “no action” to address the challenge of accessible and affordable coverage is not a viable option. All are eager for solutions and willing to consider virtually any strategy put forth—including, for the first time, universal coverage. Interestingly, however, no respondent group feels that there is sufficient public will in Georgia to address this issue, especially within the political arena.

To move forward, Georgians must achieve consensus on several key issues for which sharp disagreement persists:

- The extent to which access to healthcare should be available to all Georgians.
- Whether uninsured Georgians should be provided with primary care, emergency care, or no care at all.
- The role of government in subsidizing and/or administering health insurance coverage.

As an initial but important step, citizens, communities, providers, and state leaders must be educated on the economic impact of the uninsured – the costs to society of continuing on the current path, as well as the potential savings and improved productivity that could result from expanded access to affordable health coverage.

*For more information, please contact: The Governor’s Office of the Consumers’ Insurance Advocate 404-463-1010  
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