

Employers advised to become better health care managers

Employers who traditionally have "given the store away through health-care benefits" must ask more questions and provide programs for employees to keep them out of the hospital, said H. Tom Bueltner, vice-president and chief operating officer of Kelly Health Care, Kelly Services.

"The responsibility has to be shifted to the users of health-care services," he said.

"Americans have always looked for a quick fix, a pill, something instant. But there is no quick fix, so we must look for something to induce us to stay out of hospitals."

BUELTNER POINTED out that employers will balk as costs continue to rise.

"The crisis is here today," Bueltner said. "The solutions have to be for employers to become more intelligent purchasers of health care so they can regulate health-care benefits. Business needs to manage health care with the same methods as we manage our businesses."

He spoke at a business symposium sponsored by the American Hospital Association in Dearborn. It was co-sponsored by the Michigan State Chamber of Commerce and the Michigan Hospital Association. Its purpose was to bring Detroit-area business leaders and hospital administrators together to discuss health-care cost-containment issues.

Bueltner said that in order for health-care costs to be contained, some fundamental changes must be made in the

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— Tom Bueltner
of Kelly Health Care

way Americans live and take care of themselves.

AHA PRESIDENT Alex McMahon said that just as employers have been part of the problem of rising health-care costs through benefit programs for their employees, they can be part of the solution.

McMahon cited business-management strategies that have helped hospitals hold down costs, such as being more cautious about purchasing and watching inventories, and reducing staff as occupancy declines.

AHA, with more than 7,000 hospital members nationwide, has adopted such strategies to curb costs as establishing screening programs for disease detection, disseminating information on health to its employees and restructuring benefit plans with a cost-sharing element.

McMahon said, "A competitive marketplace will be a better disciplinary than government regulation, which tends to freeze things in place." He said that changes in incentives to hold down costs have decreased the rising cost of hospital care.

In the first quarter of 1984, hospital costs rose 4.6 percent from 1983. In 1983, hospital costs were up 12 percent from the previous year, and the average rate of increase from 1965 to 1982 was 15 percent.

Hospitals, he said, will continue to keep costs down through shorter stays, fewer tests and fewer admissions.

THE HEALTH system will change as incentives change, said Stanley R. Nelson, president of Henry Ford Health Care Corp.

Nelson said Michigan, which has gone through a traumatic economic period, has a higher-than-average health-care factor. "The UAW package sets the pattern for the community and the auto industry wrote a blank check 25 years ago for health-care benefits. I have faith in the resiliency of the health-care system to respond to changes."

As incentives change, they hopefully will bring about efficiencies in the health-care field, said Henry J. Aaron, senior fellow in economic studies at the Brookings Institution in Washington, D.C.

"If we are to slow the rate of growth of health-care costs, we may have to have a curtailment of beneficial care," he said. "And if we want that, we will have to change tax laws and create other regulatory instruments. All of this results in a painful prescription for health care in this country."

Aaron said that the United States is beginning one of the most wrenching debates in its history — to hold down health-care costs, which are a result of the national desire to increase access to health care.

Access to health care and technology has become available through private insurance and national programs. As long as these trends continue — financial access to health care and the continuance of our dynamic technology — the pressure on the medical community will remain, Aaron said.

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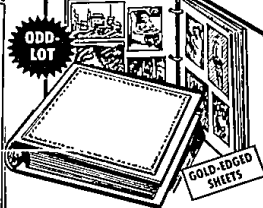
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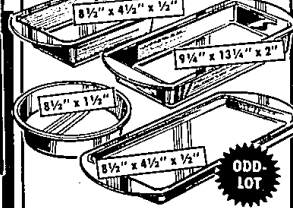


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