

# Families can combat soaring health care costs

NEWARK, Del. — Health care costs have risen so dramatically that the average family may begin to question whether they can afford the best available. According to Sally Foulke, University of Delaware extension home economist, "The national expenditure for health care is now \$1,500 for every man, woman and child. At the current rate of increase, this figure will double by 1990."

The economic questions raised by these statistics are disturbing: Can Americans afford to enjoy a quality of health care that is second to none? What impact will this investment have on the quality of their lives? Will continued rising costs result in rationing of health care?

"These issues suggest moral and ethical problems as well," Foulke points out. If services are rationed, who will receive medical care and who will not? How should health care facilities be used? Should they be used to prolong the lives of comatose, hopelessly ill patients or to save those whose health can be restored? Who should pay for test tube fertilization which allows childless couples to conceive?

Who currently pays the \$1 billion per day spent on health care? "We all do, in one way or another," Foulke says. "We pay more for goods and services, and insurance costs rise, too. Not only do we pay higher fees, but also larger deductibles."

The largest share of personal health care expenditures currently comes from public funds—a rapidly shrinking source. Thirty million Americans depend on Medicare to pay their medical bills. Although this program is currently predicted to remain solvent until the late 1990s, it could go bankrupt. Almost half of all funds paid to nursing homes come from Medicaid. Medicaid benefits are being slashed.

Nine out of 10 American families have some type of health care coverage. Yet even this protection is at risk for those who receive it as an employment benefit. Many companies are asking employees to pay more for health insurance coverage, while cutting back on benefits. Increased insurance costs are passed on to all consumers, as well. The price of health care services and products rises as insurance premiums are tacked on.

"Besides, one-third of all health care costs are still paid directly by the consumer," the extension home economist says. Balancing the family budget means making spending decisions between health care and food, shelter, clothing and education.

What has caused health care costs to skyrocket? Many people assume that it is a normal part of general inflation, but Foulke says the issue is far more complex. Inflation is only a minimal part of the problem.

"We all need to understand the

implications of a third party payment system and our responsibility to that system," she says. "In the past, the third party system has encouraged spending and a philosophy of let-somebody-else-pay-for-it."

Besides inflation and the third party payment system, the home economist cites other factors that have contributed to escalating costs:

- Increased percentage of elderly in the population;
- Government funding of national health expenditures such as the Hill-Burton program which stimulated hospitals to over-expand through tax exempt status for construction bonds;
- Advanced medical technology, including increasingly sophisticated equipment and testing procedures;
- Competition among hospitals to out-do each other in adding expensive, state-of-the-art equipment;
- Increased tendency to hospitalize or institutionalize patients instead of seeking effective but less costly alternatives;
- Ineffectiveness of marketplace supply and demand incentives adopted from other industries;
- High public expectations for health care generated by the publicity regarding expensive, experimental techniques such as transplants;
- Emphasis on specialization by doctors;
- Efforts to increase education for doctors;
- Union contracts involving comprehensive insurance for employees.

Nearly half of every health care dollar is spent for hospital costs, which have increase at roughly two-and-a-half times the rate of other goods and services.

Foulke says one approach to controlling costs is to insist that hospitals operate as efficient businesses. Congress has moved in that direction in its reform of Medicare financing. The new system estimates costs based on a patient's diagnosis, and sets in advance standard national payments for various kinds of treatments rather than reimbursing a hospital for costs after they have been incurred.

Under the revised Medicare plan, if costs run over, the hospital must now bear such costs; if under, they keep the difference. The reasoning behind these changes is that by setting a ceiling on payments, cost efficiency will be encouraged.

Foulke points out that the impact of such changes is difficult to assess. If this measure saves money for the Medicare system, will hospitals make up their shortages by charging other patients more? How does shoring up the public assistance agencies affect the quality of everyone's life?

"The real root of the cost crisis," says Foulke, "is the structure of

the American health care system. The focus is almost completely on treating disease rather than preventing it. Of every dollar spent for health care," she says, "97 cents is spent on treatment, 2.5 cents on prevention and only half a penny on teaching people how to stay healthy."

## Cutting Health Care Costs

But despite the nationwide epidemic of spiraling health care costs, it is still possible for individual families to write their own prescriptions to minimize expenses. According to Foulke, there may be no immediate cure for high prices, but with regular treatment using good consumer skills, the prognosis is excellent for controlling some of the worst symptoms.

Foulke and Dr. John Glenn of the Sussex Advisory Council recently conducted a workshop, "Containing the Soaring Cost of Health Care," at the University of Delaware Farm and Home Field Day in Georgetown. Their first and foremost advice is not to get sick. Although this sounds obvious, they say each individual can do much to stay healthy: eat nutritious food, exercise regularly, manage stress and develop good safety habits at home and at work.

But people do get sick and accidents do happen. That's when it pays to have a strategy for economizing without compromising health care quality. Foulke and Glenn recommend that each family establish a routine for handling health problems to reduce the stress that financial decisions can add to an emergency or dangerous illness.

To begin with, they say everyone should have a personal physician, HMO, or neighborhood clinic for preventive care and treatment of minor illnesses and injuries. Save the emergency room for emergencies.

Once a trustworthy doctor has been found, it's crucial to establish good communication. The doctor's role is to serve the patient, who has the right to insist on full explanations in everyday English. Doctors are more open with patients who assert themselves and expect to understand their problems and treatments. Foulke recommends using the following assertiveness tactics when talking with a doctor:

- Maintain eye contact.
- Use a clear voice.
- Communicate briefly and to the point.
- Make your feelings known.
- Try to remain calm and confident.
- Begin statements with "I," such as "I feel this way," or "I need."
- Be open and honest.

Establishing a useful dialogue is easier with advance preparation. Each family should maintain its own health records, the home economist says. Keep an inexpensive notebook for each mem-



ber, then simply jot down dates of all illnesses and treatments. Immunization records are very important, as well as listings of childhood diseases (chicken pox, measles, mumps). All respiratory problems, allergies and reactions to drugs should be recorded.

Always take this record book along to the doctor's office. It's also helpful to write down in advance questions for the doctor

about your condition and possible treatment.

It is important to persist until all your questions are answered, even if this seems difficult at first. Foulke and Glenn suggest asking the following questions regarding diagnosis and treatment.

- Is the treatment really necessary?

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## BACK HOME

By Michelle S. Rodgers



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### Fall Folklore

Can you answer these fall folklore questions correctly? In the old nursery rhyme, what was Peter Peter's full name and where did he keep his wife? In "The Legend of Sleepy Hollow," what was the "head" that the headless horseman carried under his arm? Where did the Halloween tradition of carving jack-o'-lanterns out of pumpkins originate and what was its significance? and Where did the name jack-o'-lantern come from?

Well, if you know the answers to these questions you are well versed on the folklore of this time of the year. Jack-o'-lantern is derived from "Jack with a Lanthorn," supposedly an imaginary light that hovered over swamps, misleading unwary travelers. The tradition of carving a jack-o'-lantern originated in England, where it was believed that the eerie light cast by these lighted, hollowed-out, carved pumpkins would ward off evil spirits.

The pumpkins visible at every market stand and farm lane remind me of enjoyable Halloween traditions. However, this is not always an enjoyable time of the year for the younger child who doesn't like having his face covered with a mask or knocking on strange doors.

A Halloween party for smaller children might be a safer and happier alternative to the traditional trick-or-treating. Here

are a few no-lose party ideas to get you started.

**Costumes:** To save anguish and spare the shy child, have children come dressed in everyday clothes and bring a favorite doll or toy animal dressed in costume or wearing a mask. This avoids the bad feelings about not being the best dressed.

**Treats:** Make a batch of large, flat sugar cookies and some orange frosting. Place a glob of frosting in the center of each child's cookie and let him or her spread the frosting around with a popsicle stick. Then pass out raisins and shredded coconut to use as decorations. For a sugarless alternative, use round crackers and soft, orange cheese spread. Then decorate crackers with raisins.

**Puzzle Match-Up:** Buy a set of cardboard Halloween picture decorations. Cut each picture into two pieces. Mix up the puzzle pieces and give a piece to each child. Then have the children try to move around to match up their puzzle pieces. Everyone wins, because eventually only two children are left, and their puzzle pieces will obviously match.

Whether you participate in Halloween festivities or not, you might be interested in one more bit of folklore. In ancient China, the pumpkin was a symbol of wealth and success.

# Family Living

