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Failed health-care experiment

By **TBO.com**

The federal Center for Medicare and Medicaid Services is being asked to grant Florida a waiver to expand a managed-care experiment for Medicaid recipients across the state. I am urging the federal government to deny the waiver.

The Florida Legislature's planned conversion of Medicaid into private managed-care plans has the backing of the for-profit HMO industry. If the CMS agrees, the plan is to expand statewide the Medicaid Reform managed-care pilot project that since 2006 has been tested in Broward County and several other counties.

In Broward, I watched as private HMO plans in the pilot program denied necessary medications for patients, chased good doctors out of Medicaid and pocketed the money they got from the state. Two years into the pilot, an independent study of the program by Georgetown University found that patient access to health care was getting worse. Only 8 percent of the physicians surveyed said the reform pilot had made Medicaid better. About two-thirds of physicians surveyed said the Medicaid Reform plans "prevented a patient from obtaining needed drugs."

Doctors and hospitals suffered too. The statewide Florida Council for Behavioral Healthcare reported that providers they surveyed had lost as much as 50 percent of their Medicaid revenues in Medicaid Reform counties, largely due to service limits and the private plans' failure to pay claims. "The current Medicaid Reform model is not working," the council stated. Also, the Pacific Health Policy Group, in a report to the Legislature last year, concluded that such traditional managed-care models "do not work for persons with severe mental illness or for those with other long-term chronic conditions" due to their greater health-care needs. The Florida Medical Association also opposes the expansion.

I picked up a major newspaper recently and found out that these same legislators in our "broke" state just choked off significant revenue by cutting property taxes paid by major corporations by about 30 percent. Bell South, Universal Studios, Hilton and Marriott each will pay the state hundreds of thousands of dollars less in taxes this year. They are major campaign contributors.

The push to force for-profit managed-care on Medicaid patients is not about balancing the state budget. It's about rewarding private health insurers that play the high-stakes game in the state capital, whether or not it cheapens an essential service for 3 million children and poor people who are unable to contribute to election campaigns — and who have nowhere else to turn for medical care except to Medicaid. The CMS has an obligation to speak for the voiceless, the poor and the disabled of Florida. It can do this by denying the

waiver that would foist managed care on them.

Stephen Galvacky

Delray Beach

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