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Some things are actually working in health care

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As I read my way through the thick white binder, putting in an hour or so at the kitchen table each night that week, and a couple hours on a sunny Saturday afternoon in a room with a dozen or so other people, common themes began to emerge.

In entry after entry I read, there were similar threads: how to better engage and educate patients, how to improve cost and quality, how to improve access to care, and how to better deliver care to those who need it the most and are often able to access it the least.

Later this month, when the Michigan Association of Health Plans presents its 2009 Pinnacle Awards for best practices, you see specifics about the innovative strategies that some HMOs in Michigan are deploying to do what they do better.

Within the white binder were numerous Pinnacle Award entries from HMOs across Michigan that are trying things that are indeed improving the cost and quality of and access to care while generating a demonstrable return on investment.

And nobody in government, or anywhere else, had to tell them to do it, much less mandate it through legislation.

Nor did anybody have to tell hospitals participating in MI-STAAR (see page 2) that they need to do a better job to cut down on hospital readmissions. Or tell Blue Cross Blue Shield of Michigan or Priority Health or Grand Valley Health to invest the money they're investing in the patient-centered medical home.

These are all examples of real health care reform -- reform driven by the private sector, not by political rhetoric and ideology that consistently seem to want to make profoundly complex problems sound simple, spew tired cliches and offer bad stereotypes.

Surely nobody is satisfied with the current state of health care in America -- especially the people who work within it -- and most people would agree reforms are direly needed.

Yet much of the debate so far has been dominated by the far sides of the political spectrum, which seem to believe that demonizing all views contrary to their own and imposing their own will is the only way to effect change.

Lost in the rhetoric and finger pointing are all of the things that are done well in health care. That was illustrated by the entries in this year's Pinnacle Awards, which I was asked to help judge, as well as by many other examples in the marketplace.

So rather than just concentrate on what's wrong with health care, let's also give credit to what is done well and acknowledge the efforts of those folks who are working feverishly to make the system better.

And maybe, just maybe, we can all learn, and use what is right to improve things for everybody involved.

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