

Obama: Base health care payments on quality, not quantity

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President Barack Obama wants to cut health care costs by reducing inefficiencies like unnecessarily long hospital stays and excessive paperwork for doctors that rack up big bills.

Obama on Wednesday will launch what the White House calls a Health Care Payment Learning and Action Network. The White House says more than 2,800 [health care](#) providers, patients and consumer groups have agreed to take part.

The goal is to tie more payments for [health care services](#) to the quality—not quantity—of services rendered. Earlier this year the administration set a goal to tie 30 percent of Medicare payments to quality and value, but Obama wants to go further.

Obama will announce the new network during a speech marking the fifth anniversary of his [health care law](#), the Affordable Care Act.

The Centers for Disease Control and Prevention reported this week that the number of uninsured U.S. residents fell by more than 11 million since Obama signed the law. Although that still would leave about 37 million people uninsured, it's the lowest level measured in more than 15 years.

The health care law offers subsidized private coverage to people who don't have access to it on the job, as well as an expanded version of Medicaid geared to low-income adults, in states accepting it.

The White House says 16 million people have gained health insurance, a considerably higher estimate than Tuesday's findings from CDC's National Center for Health Statistics. The figures cited by the White House cover a longer period of time, through the beginning of this month. That includes the law's second sign-up season. The estimate was produced by the principal policy adviser to Health and Human Services Sylvia M. Burwell.

The main question hanging over the law now is a Supreme Court case in which opponents argue that its subsidies are illegal in most states. They contend that the exact wording of the law only allows subsidized coverage in states that have set up their own insurance markets. Most have not done so, relying instead on the federal HealthCare.gov.

The administration counters that the context of the law makes it clear the purpose was to expand coverage in every state. A decision is expected to be announced by late June.

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