

# VIEWPOINT

VOLUME 2, ISSUE 1

JULY ISSUE

## THE PRESIDENT'S MESSAGE



**W**ell, several of us are off for New York for the NAHU National Convention from June 28<sup>th</sup> through July 1<sup>st</sup>. Besides myself, Connie Puett, Kristin Stewart, Terrie Trevino, Don Mathern, Brad Miles, Jordan Redman, David Wilcox, and some guy named Scott Leavitt—I think he's President or something, will be jetting across the country to represent Idaho.

This will be Scott's last big hurrah, as Russ Childers from Georgia will be sworn in as the new NAHU President effective July 1<sup>st</sup>. Russ will do a great job---he's a down to earth good-old-boy who is very dedicated and personable—one heck of a nice guy.

I want to extend a big thank you from the IAHU board to Scott for his service as National President. This took up much of his time

for the past year traveling all over the country to "Educate America" with NAHU's message. His wife Amy, should also be commended for the strong support she has given to Scott's Presidency.

We'll be kept busy with an array of meetings from Legislative issues to Regional meetings, as well as several professional development sessions and leadership breakouts which are designed to address members duties for their upcoming board positions. These are very helpful for a state or local chapter as it helps the chapter get "on track" to have a successful year. Again, this is why we need to have more members attend—to learn the ropes. A couple of motivational segments will also be presented including Johnny Bench of Cincinnati Reds fame.

Another important duty we will have is attending the House of Delegates where NAHU issues are voted on as well as election of new Regional VP's and NAHU's incoming Secretary will be elected.

Also, hot off the press--- the Region VII Leadership Conference will be held August

6-7<sup>th</sup> in Salt Lake City, Utah. The event will be held at the Radisson Hotel SLC Downtown –1-800-333-3333. Cost is \$129 per night. Make sure and let the hotel know your with NAHU Region VII to get the discount. You can register for the conference at [www.nahu.org](http://www.nahu.org) cost is \$60.00. Please try to attend this event; you can gain so much helpful knowledge. I ask each member to attend at least one conference in their lifetime. This is an affordable one to attend so take advantage of it. Check with your local or state board if you need help with funds. There may be some money available to offset costs. Please contact me with any questions.

Wish us luck in New York. I can't wait to take a cab ride, have a slice of New York Pizza, and hit the Hard Rock Café for some "chocolate milk."

*Dana Drake*

IAHU President



## CONTEST

We are finally going to have a "Viewpoint" contest each month. Prizes to be determined. Here is what is going to happen.

Each month there will be a different contest. Examples would be guess the picture, find the hidden item, et cetera. Then you submit your answers to Wendy Leatham by a specific time in which we will draw from that the winner.

This months issue has the first of the contest. You will see a picture on page 4 of the issue. Guess what historic place this is a picture of and submit an email to Wendy with the Subject line of your email "Contest". This months contest entries need to be submitted by July 15th and the winner will be notified a couple of days later.

We will mention the winners in the following issue of Viewpoint.

Good luck and happy guessing/searching!

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*Capitol during the inauguration of Governor Haines (1/1/1913)*

*Courtesy Idaho State Capitol Commission*

**WE'RE ON  
THE WEB!  
VISIT US AT**

THROUGH EDUCATION,  
ADVOCACY AND PROFESSIONAL  
DEVELOPMENT, WE WILL  
IMPROVE OUR MEMBERS ABILITY  
TO MEET THE HEALTH,  
FINANCIAL AND RETIREMENT  
SECURITY NEEDS OF ALL  
IDAHOANS.

## LEGISLATIVE UPDATE (BY TOM SHORES)

**A**s you are aware the President's true colors are beginning to become public, he wants a public health plan. He is selling the plan as a way to keep the private plans honest. As the plans become public we are seeing the following:

1. The plan would become cost effective by reducing the amount the plans pays to providers. The plan would force hospitals to give up the extra money they get for treating uninsured patients. The payments made to the physicians would be tied to the Medicare reimbursement rate with a 5-10% increase. The effect here will be fewer providers taking Medicare patients, to control costs the plans will ration care. The promoters are not calling it rationing but they are calling their approach "best medicine". The discussion is also centered around deciding what medical care would be given to those in the last days of life to reduce the money spent in the last two years of life.

2. Subsidies would be made available for those who can not afford the public plan. The subsidies would be given to those who are a percentage of the federal poverty level; the range being discussed is 200% to 400%. 400% would be the income of over \$100,000 for a family of 4. Under these rules almost everyone would qualify for some kind of help. The subsidies would only be available to the public plan. No money cur-

rently it being discussed as available to private plan. The result of this portion of the plan would be millions of people moving to the public plan. Employers who are burdened with the cost of providing health care would gladly discontinue their current plans forcing millions to go to the public plan. The result, a single plan nationalize health care plan.

3. An employer mandate that would require employers to provide a plan for their employees (full time or part time) or pay a penalty. (This is a shadow of the Mass plan that forces the play or pay idea) the penalty varies by plan but some where around \$1,000 for a full time employee and \$500 for a part time employee per year. The penalty (like that occurred in Mass be less than what the cost of providing the health policy, thus many employers will voluntary terminate their plans.) If an employer terminates his/her plan there will be some sort of penalty to be determined.

4. An individual mandate is also being discussed. This became more prominent when BCBS association said that they would support guaranteed issue without pre-existing conditions if EVERYONE had a policy. Without everyone required to have health insurance, a person could wait until they got sick and then apply for health insurance. Since they could not be turned down, charged more premium because they

were not healthy or have any pre-existing conditions there would be no logical need to have insurance until you got sick. That would destroy the health insurance industry. How the individuals would be required to purchase a policy or form where (public or private or employer provided) has not be determined. How much the penalty for not purchasing a plan, how the penalty would be collected and what exclusion would be granted is still under discussion. One exemption that has been floated is that if you for religious reasons for not purchasing insurance you could be exempt from the penalty.

There is a group of legislators and Obama staff that are floating the idea that because the 50 million uninsured (a very highly disputed number to say the least) would not be customers the \$1 trillion deficit for paying the plan would be much less because the insurance companies, hospitals and physicians would now be getting more money from these uninsured. That is only a smoke screen to try to make the idea easier to sell. If the results from Mass are an indication of what we could expect, more people will leave their private plans and go to public plans, the medical community will be overwhelmed with usage for people who did not have health insurance and now want to see a physician. The latest projection in Mass is that it is taking 18 months for a person (Continued next page . . .)

## EASTERN IDAHO

No update by press time.

Trent Sutton (President) tsutton@semonsfinancial.com or 208-238-1171

## NORTH IDAHO

The North Idaho Chapter of Health Underwriters is off from June through August.

Chapter Membership meetings resume in September and are the first Tuesday of each month at 11:30 in the Coeur d'Alene Resort at the Shore Lounge.

Dave Munger (President) dhamunberins@roadrunner.com OR 208-687-2204

## SOUTHERN IDAHO

Southern Idaho starts meetings again in the fall (more information in the following issues).

Board meetings are the 2nd Monday of each month. Chapter Membership meetings are the 3rd Thursday of every month at 11:30. Note, that the location will be changed and the new location will be announced soon.

Andy Lyda (President) alyda@regence.com or 208-737-4117

## TREASURE VALLEY

The Treasure Valley Chapter starts regular Chapter Membership meetings in September.

After a two year trial run, the Treasure Valley Chapter is going back to regular monthly meetings. More information will follow directly from the Chapter President, Trent Nate.

Chapter Membership meetings are the 2nd Thursday of each month.

Trent Nate (President) tcnate@regence.com

## LEGISLATIVE UPDATE CONTINUED . . .

(Continued from previous page) to get in to see a physician for an annual exam. The reason is because the physicians are limiting the number of annual exams per day they will do for public plans because of the reduce reimbursement. Thus the lower numbers of exams per day, the lack of providers who will do them and the mass of people now wanting one have caused the 18 month wait.

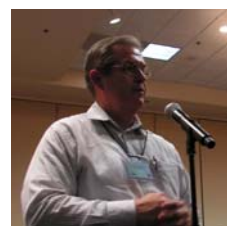
There are other parts that need to be addressed; federal employees are specifically EXCLUDED from participating in the public plan. The question must be asked, "If this plan is so good, why

would the federal employees be excluded?" One radio commentator asked that his listeners call their senators and representatives to see if they would be the first to drop their current plan and go the public option. There are other issues that are coming up, the government wants to encourage more physicians to go into family practice and reduce the number of specialist. This could be good in the short term but could take the smartest people who could be saving your and my life later in life to become engineers instead of heart or brain surgeons for example.

There are other issues that

will be discussed later. The biggest is that we will not get paid any more. More to come. I will be attending a "fly in" to Washington DC on July 15<sup>th</sup> to lobby key senators and representatives to hopefully put some rational thought to what they are doing. The bottom line is that the whole debate has less to do with health care as it has to do with control of the American people.

Tom Shores



### SPONSORS

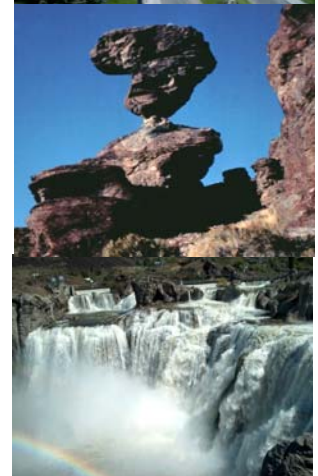
*Platinum Sponsor*



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*More to be announced!*



## CONTEST



Can you name this historic U.S. landmark?

## UPCOMING EVENTS

### *NAHU Fly-In*

**Day:** July 14th & 15th, 2009

**Location:** Washington, DC

### *Region 7 Leadership Conference*

**Day:** August 6th & 7th, 2009

**Location:** Radisson Hotel Salt Lake City Downtown

### *North Idaho AHU Charity Golf Tournament*

**Day:** August 21st, 2009

**Location:** Highlands Golf Course (Post Falls, ID)

### *2010 NAHU Capitol Conference*

**Day:** March 8-10, 2010

**Location:** JW Marriott Hotel Washington, DC

### *2010 NAHU Annual Convention & Exhibition*

**Day:** June 27-30, 2010

**Location:** Hyatt Regency Chicago, IL

For more information on these events or other events please visit the NAHU or IAHU websites listed below:

[www.nahu.org](http://www.nahu.org)

[www.iahu.org](http://www.iahu.org)

## SPONSOR FOCUS

**W**hile PacificSource Health Plans has a 76-year history in the Northwest, we're still fairly new to Idaho. We appreciate this opportunity to share a little information on our organization.

We opened our Boise office in 2007 and recently announced that we are in the process of acquiring Primary Health, Inc. By combining the strengths of two independent regional health insurers, PacificSource will be able to provide Idahoans with affordable, quality healthcare and personal service at the local level more efficiently and cost-effectively.

PacificSource is an independent, not-for-profit health plan founded by doctors in Eugene, Oregon in 1933. We now serve all of Oregon and Idaho and were recently granted licensure in Washington. In addition to individual health plans and group medical and dental coverage, we provide self-funded employee benefit plans, flexible

spending accounts, HRAs, and COBRA administration services through our subsidiaries, Manley Services and Select Benefit Administrators.

Our mission is simple: helping people get the healthcare they need. We demonstrate our commitment to that mission through our personal approach to customer service, our partnership with healthcare providers, agents, and other community stakeholders, and our involvement in healthcare reform efforts at the local and state levels.

Historically, we've been able to grow and remain independent by taking a slow and deliberate approach to growth; we've never focused primarily on market share. We identify markets where we believe there's an opportunity for our community-based approach to be successful. For that to work, we need to be on the ground, working side by side with the local healthcare delivery systems, safety net clinics, and business community to provide solutions that will ultimately result in more people having better access to quality

healthcare services. That's not an approach that many of the larger health plans can, or would likely want to, pursue.

We are a mission-driven organization that is committed to delivering the best value possible to our customers, a high level of personal service, and a deep focus on the communities where we do business. Our history, our commitment to doing this right, and our strong group of dedicated employees help us achieve those goals.

We are pleased to support IAHU and look forward to working with all of you to achieve our common goal of helping everyone get the healthcare they need.

For more information please contact Dave Ewers at the following:

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# PacificSource

## HEALTH PLANS