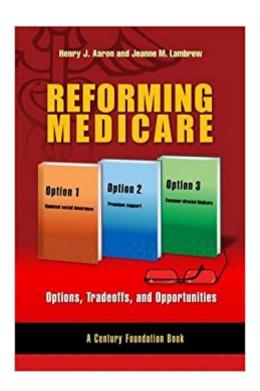


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Reforming Medicare: Options, Tradeoffs, And Opportunities (Century Foundation Books (Brookings Hardcover))





Synopsis

Everyone agrees on the need to reform Medicare but not on how to do it. Some argue the program is too comprehensive, others that it is not comprehensive enough. Some suggest it pays too much for health care, others, too little. Meanwhile, the financial stakes continue to mount. Medicare spending exceeded \$400 billion in 2007, making it more expensive than the entire health systems of most other nations, as well as the largest national public program other than Social Security and national defense. In R eforming Medicare, Henry J. Aaron and Jeanne M. Lambrew deftly guide readers through this complex debate. They identify and analyze the three leading approaches to reform. Updated social insurance would retain the current system while rationalizing coverage and reducing bureaucracy. Premium support would replace the current system with a capped, per-person payment that beneficiaries could use to buy health insurance. Consumer-directed Medicare would have beneficiaries pay for care up to a high deductible from government- supported savings accounts and offer premium-support coverage above the deductible. In addition to rating each option on its ability to promote access to health care, improve the quality of care, and control costs, the authors evaluate each reform's political strengths and weaknesses. Given the heat generated by the Medicare debate, it is unlikely that any single approach will be implemented in full. Consequently, Aaron and Lambrew describe incremental strategies that blend elements of each plan. Their analysis provides essential insight into the types of hybrid policies that Congress will consider in coming years.

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"Aaron and Lambrew are two of the most thoughtful, judicious students of health policy around, and their efforts at achieving clarity and balance are evident... The first three chapters, in particular, provide an excellent, concise, but systematic overview of Medicare and Medicare policy, which could serve as a useful primer for anyone new to the subject." —Bruce C. Vladeck, Health Affairs

Henry J. Aaron is a senior fellow in Economic Studies at the Brookings Institution, where he holds the Bruce and Virginia MacLaury Chair. Among his many books are Can We Say No? The Challenge of Rationing Health Care, with William B. Schwartz and Melissa Cox (Brookings, 2006), and Reforming Medicare: Options, Tradeoffs, and Opportunities, written with Jeanne Lambrew (Brookings, 2008). Jeanne M. Lambrew is associate professor of public affairs at the Lyndon B. Johnson School of Public Affairs, University of Texas Austin, and a senior fellow at the Center for American Progress. From 1997 to 2000, she worked on health policy in the Clinton White House. Patrick F. Healy is an associate in the law firm of McDermott Will & Emery LLP and is based in the Firm's Boston office. He focuses his practice on general health law, including the representation of hospitals, health systems, and other health care clients.

Very short on text; much of the book is appendices. No amazing insights here.

Henry Aaron and Jeanne Lambrew are two of the nation's leading experts on health policy. President Obama has named Lambrew Deputy Director of the new White House Office of Health Reform. Together Aaron and Lambrew have written an informative and accessible overview of the issues facing Medicare--the federal program that provides health coverage for older Americans and persons with disabilities. Their analysis is commendably free of the rhetoric of crisis that too often infuses discussions of the topic. They point out that Medicare's cost growth has roughly paralleled that of private health spending and that systemic reforms in the U.S. health care system would do far more to control Medicare spending than any reform in the program alone. Medicare nevertheless confronts major long-run financial challenges and leaves gaps in benefit protection. Aaron and Lambrew explain and analyze three distinct approaches for restructuring Medicare to deal with these challenges--an improved government-run social insurance program, competing private

insurance plans with government premium support, or high-deductible insurance policies coupled with health savings accounts. Their analysis is extremely well balanced and will not fully satisfy die-hard advocates of any of the approaches. My only reservation is that the options are highly stylized, whereas the most likely outcome will feature a mixture of public and private plans competing on a relatively level playing field. Overall, however, the authors have succeeded in their goal of providing a clear, even-handed guide to the debate over Medicare reform.

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