
CommonHealth

Is Massachusetts Reform Making Residents Healthier?



WBUR's Martha Bebinger

WBUR's Martha Bebinger has covered health care reform in Massachusetts longer and deeper than any other journalist on the beat. Here, she reports on attempts to answer a key question about reform in Massachusetts and around the nation: Does it make people healthier?

For a week in the summer of 2009, Dennis Foley watched his right foot swell and turn red, then purple with a tinge of blue. Finally, when he could barely walk, Dennis hobbled into the Brockton Hospital emergency room. He had not seen a doctor for 10 years and never had a regular physician.

"I couldn't afford health care," says Foley, "so I tried not to worry about my problems."

Foley was in Brockton Hospital for 18 days while doctors worked to avoid amputating his right leg and control the infection. Along the way, they diagnosed high blood pressure, diabetes and an irregular heart beat, and enrolled Foley in the state's subsidized health plan, Commonwealth Care. Today, Foley, who is a part-time custodian, has his blood pressure and diabetes in control, rarely feels chest pain and sees his primary care doctor on a regular basis.

We've heard many such stories since the state passed its landmark health coverage law five years ago. There are newly insured women who had their first mammogram, found a lump and were treated for breast cancer; men who had their first stress test and received stents to open dangerously clogged arteries; and my ceramics teacher whose cataracts had grown so cloudy he could no longer paint pots or drive.

But beyond these individual stories, there is no proof that Massachusetts residents are healthier; no studies that show lower rates of diabetes or heart disease and no evidence that we are living longer. This is an important issue for states around the country where lawmakers wonder if national health reform is worth the money and effort.

Supporters of the Massachusetts law say it is just too early to assess the effects of expanding health coverage, but they have no doubt there is a link between coverage and better health. Dennis Foley's doctor at Brockton Neighborhood Health Center, Joe Panerio-Langer, says Foley is healthier because he's receiving regular care. And Panerio-Langer believes that with more residents covered by health insurance, he and other doctors are addressing more patient problems before they develop into a serious illness.

Amanda Kowalski, an economist at Yale University, supports the claim that increased coverage is contributing to a decrease in serious illness, but she doesn't have firm evidence. Kowalski analyzed information about patients as they left the hospital in Massachusetts before and after the law passed. She and a colleague compared the difference to data from other states in a working paper published by the National Bureau of Economic Research last year. Kowalski says there was a 2.7% decrease in the

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number of patients treated for preventable conditions such as a ruptured appendix, asthma and foot or leg amputations. It's a small number, but Kowalski says it is statistically significant.

Kowalski isn't sure why fewer patients in Massachusetts are seeking hospital care for preventable problems, but she suspects it's because patients were treated at an earlier stage through a primary care doctor.

Some public health leaders argue that increased vaccination and cancer screening rates as well as lower smoking rates are connected to the increased numbers of Massachusetts residents who have health insurance and see a doctor.

You might think it would be easier to prove the link between coverage and better health. It's not so hard to prove with Medicare. Sixty-five-year-olds who are uninsured before they're eligible for Medicare are typically not as healthy as 65-year-olds who've been covered by private insurance, says John Ayanian, a physician and professor of health care policy and medicine at Harvard Medical School. But Ayanian's work shows that after five to seven years on Medicare, formerly uninsured members have reversed their rapid health decline and are in much better health than would be expected.

Ayanian says he would expect the same effect from covering more residents in Massachusetts, "but many of the adults who've gained coverage are younger and healthier than those we studied entering the Medicare program, so it make longer to see those health benefits develop over time."

In addition, Massachusetts offered free care to many low income residents who couldn't afford insurance before the law passed.

So how long might it take to see the health effects of health insurance in Massachusetts? It's not clear. There is more research underway, but sound study would compare changes in Massachusetts to changes in states that did not expand health coverage. If other states implement the federal health coverage law, starting in 2014, Massachusetts loses the benchmark it needs to make a good comparison. We'll keep you posted on what researchers find between now and then.

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