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The Benefits of an Integrated Healthcare System: Intermountain and SelectHealth

Integrated healthcare systems, such as the partnership between Intermountain Health and SelectHealth, provide significant benefits to both patients and communities. By aligning healthcare providers and insurers under a single network, these systems improve efficiency, enhance care coordination, and reduce costs while ensuring high-quality patient outcomes. Eliminating such models, particularly in Nevada, as proposed by Senate Bill 192 (SB 192), Section 26, would have severe negative consequences for healthcare accessibility, affordability, and overall public health.

Improved Patient Outcomes and Coordination of Care

One of the primary advantages of an integrated healthcare system is the seamless coordination between insurers and healthcare providers. In traditional, fragmented healthcare models, patients often experience gaps in communication between their primary care physicians, specialists, and insurers. These gaps can lead to delays in treatment, misdiagnoses, and increased healthcare costs. Integrated systems like Intermountain and SelectHealth use data-driven approaches to monitor patient health, reduce unnecessary hospital visits, and promote preventive care and provide a continuity of care system.

For instance, through SelectHealth, Intermountain is able to proactively manage chronic diseases by leveraging predictive analytics and care coordination teams. This ensures that patients receive the right care at the right time, reducing hospital readmissions and emergency room visits. The result is a healthier population with lower long-term healthcare costs.

Cost Efficiency and Financial Sustainability

Integrated healthcare systems also drive down costs by eliminating inefficiencies and preventing unnecessary procedures. By aligning payment models with patient outcomes rather than fee-for-service billing, systems like Intermountain and SelectHealth incentivize preventive care and early interventions. This reduces the burden of high-cost emergency services and hospitalizations, benefiting both patients and the overall healthcare economy.

Furthermore, these systems negotiate better rates for medical services and prescription drugs, passing on the savings to consumers. In Nevada, where healthcare costs are among the highest in the nation due to limited provider competition, an integrated model helps control expenses while maintaining quality care. Eliminating such a system would likely lead to increased costs for

patients, higher insurance premiums, and financial strain on both individuals and healthcare institutions.

Community Health Benefits

Beyond individual patient care, integrated healthcare systems play a crucial role in supporting community health initiatives. Intermountain Health, for example, invests in preventive programs such as mental health services, wellness screenings, and social determinants of health initiatives. These efforts address the root causes of poor health, reducing long-term medical expenses and improving overall community well-being.

Additionally, integrated systems reinvest their revenue into community-focused healthcare innovations rather than distributing profits to shareholders. This ensures that resources remain within the healthcare system, benefiting patients rather than outside investors. In contrast, removing an integrated model would likely shift healthcare priorities toward profit-driven motives rather than patient-centered care.

The Impact of Nevada SB 192, Section 26

Nevada SB 192, Section 26, seeks to restrict the ability of healthcare organizations to own both provider networks and insurance entities. While proponents argue that this measure increases competition, it would actually disrupt the proven efficiencies of integrated care models. If implemented, this policy could fragment Nevada's healthcare system, leading to a disjointed network where patients must navigate multiple unaffiliated entities for care and insurance.

Such a change would result in higher administrative costs, duplicated services, and reduced care coordination, ultimately harming patient health outcomes. It could also deter healthcare organizations from investing in Nevada, reducing provider availability and exacerbating the existing physician shortage in the state.

Conclusion

Intermountain Health and SelectHealth exemplify how integrated healthcare systems improve patient care, lower costs, and strengthen community health. Policies like Nevada SB 192, Section 26, threaten to dismantle these benefits, leading to reduced access, increased costs, and a decline in overall healthcare quality. Rather than restricting integrated care models, policymakers should encourage their growth to ensure a more efficient, affordable, and patient-centered healthcare system in Nevada.