



# *REAL HEALTH CARE*

North Coast Citizen \* 30 November 2006 \* Tom Bender \* <[tbender@nehalemtnet.net](mailto:tbender@nehalemtnet.net)>

Turning 65 is an interesting experience. Going on Medicare. Feeling guilty about "the government dole", then remembering that it's actually MY money. I've been paying into the program since I was 10 years old. Finally having health care coverage. Finding that's only partly true – there's huge and curious gaps in the program.

A savvy local insurance agent shed a lot of light on the whole system. Agents get 15% commission on the cheapest policies, 25% on more expensive ones, which they usually steer you to. Once people are signed onto a plan, premiums rise. (Surprise!) Meanwhile, the companies are re-marketing the same plan under a new name, at the earlier competitive rate, knowing it's too complicated, or people are too lazy, to change. And, of course, we have a government supposedly believing in "free trade", which won't let us import identical but cheaper medicines from Canada.

Add another 15--25% spent on overhead and profit, another 10-15% for advertising. Plus the costs of an unnecessary layer of paper shuffling.

So right here is simple way to get rid of half the cost of health care. Get rid of the insurance companies marketing identical products. We accept it as normal when a corporation looks at improving efficiency, dismisses thousands of workers, or moves operations to some Third World country. But what happens when WE look at how to improve efficiency, and suggest dismissing unnecessary corporate roles in public services?

The reasons for our outrageous and skyrocketing health care costs, people without health care, and struggling health care providers are not complicated. There's just a lot of layers of greedies feeding in the trough but not contributing anything. And a government focused on maximizing corporate profits, not cost-effective service to taxpayers.

Single-payer health care isn't a big governmental bureaucracy, staffed by medical school dropouts. It's you choosing your own health care providers – just cutting out the extra layer of profiteering that has grown on top of the system. It's actually better, as you don't have to get "pre-approved" providers and services. It has an incentive to do preventive care, not the more expensive restorative treatment. Medicare spends less than 2% on administrative costs, vs. 20% for private insurance.

The U.S. is the *only* industrialized country that doesn't provide universal health care for everyone. We spend two and a half times the industrialized world's median on health care. Yet we have fewer doctors, our life expectancy is lower, infant-mortality rates are among the worst of industrialized countries. We spend a thousand dollars per person per year just on paperwork and administration, while Canada spends only about three hundred dollars per capita. Almost 50 million Americans have no health insurance. Many more only have minimal coverage. Medical bills are our largest cause of personal bankruptcy. Why should we live in fear of catastrophic illness, when every other country shows we can do far better?

Both Vermont and Massachusetts have enacted laws providing for something close to universal health insurance. The California state legislature recently passed a landmark universal health care bill that would for the first time ever cut out the insurers and unnecessary middlemen and cover *everyone* in a public insurance pool. It was projected to save Californians \$8 billion each year, plus provide coverage to the 6.5 million Californians who lack coverage. Gov. Arnold Schwarzenegger, after receiving \$4 million in donations from the health industry, announced that he would veto the bill.

So the spotlight shifts up here to Oregon, and to former Governor John Kitzhaber's continuing efforts to reform health care. "The cost of health care is the single-most driver behind our \$9 trillion national debt," he said. "In many state budgets, Medicaid is now the single-largest state budget item, larger than primary and secondary education."

His *Archimedes Movement* is an effort to redesign health care into a lower cost, higher efficiency system that includes everyone. Kitzhaber says that \$6.5 billion a year, in tax money alone, goes into health care here. Much of that money is wasted, he argues, because the system pays for treatment rather than prevention and because high insurance costs force many people to seek free care at hospital emergency rooms, where treatment can't be denied but costs much more to deliver. I think he's right.

Here's something you can easily get involved in and help happen. Check out his website, <[www.archimedesmovement.org](http://www.archimedesmovement.org)>. Help them. Set up local discussions. Write or email your legislators. There's a new legislative session coming up, and a real opportunity to make things better.