

GOVERNMENT RUN PROGRAMS - THE EVIL EMPIRE THREATENS

Last week's presidential debate may have been judged to be a "yawner" by some pundits, yet we were astonished by the boldness of Bush's attack on Social Security and government run health care programs (he must mean medicaid, medicare and the VA). Our Commander in Chief (CIC) stated that the problem with health care costs (which are excluding workers from coverage) is that "most health care costs are covered by third parties" and that there "are no market forces involved with health care". If this makes any sense at all, then Bush could be assumed to favor dismantling private health care insurance which is the main third party in health care. His comments on medical savings accounts are consistent with this logic since they replace insurance (private and also any government supported program) even though with an entity that could not even begin to fulfill the same purpose.

Of course we know that the CIC only wishes to dismantle and undermine government health programs (and few people were actually confused by his words to the contrary) despite the literal meaning of his phrases, he does not plan to replace or limit private health insurance. We should know better than to apply logic to the words of our CIC! We know that his medicare solution of 2003 primed the pump to lure seniors away from Medicare bribing them with a "drug discount program" of dubious financial advantage. Similarly, in his response to the question about financially sustaining Social Security he answered that "younger workers ought to be allowed to take some of their own money and put it in a personal savings account, because I understand that they need to get better rates of return than the rates of return being given in the current Social Security trust". [You mean like the stock market returns of the last four years?]

Our current health care today is largely (65%) paid for from public monies (taxes). John Kerry has no intention of excluding private insurance, but he is also not planning to decrease government oversight and investment. John Kerry has never proposed a government run health care system. The FEHB which Kerry proposes expanding beyond federal workers to all Americans is a system composed of private insurers who are organized to come-in and market their insurance coverage under some oversight. Kerry does propose adding additional government funds in also, so that there will be affordable offerings for any given American. He targets covering 96% of Americans as his goal. He is not even proposing universal health care (universal means a plan for covering 100% of Americans).

LINES AND WAITING

Our CIC who for four years now has been the chief administrator and executor of the federal government stated that "government-run health will lead to poor-quality health, will lead to rationing, will lead to less choice, to more controls", explaining his lack of concern for the VA and Medicare. He went on to challenge his audience to "just look at other countries that have tried to have federally controlled health care. They have poor-

quality health care. Our health-care system is the envy of the world because we believe in making sure that the decisions are made by doctors and patients, not by officials in the nation's capital." Well, he forgot what he said two minutes ago about third parties. Any of us who have health coverage are obviously in continual conflict with the health insurers (the major third party) not with federal officials in DC. And hasn't the CIC been in-charge of all appointments and running of these agencies now for 4 years? Doesn't he live in the nation's capital, when he's not off clearing brush?

Most recent international assessments of health care quality, in fact, put the USA nearer the bottom of industrialized countries than near the top -that's a fact. And this is so despite the fact we spend nearly twice per person what any of these other nations do. Again, Kerry has neither proposed universal health coverage nor displacing private insurers as has been done in Canada. Nonetheless, since the CIC brought it up let's consider the worst and most common complaint against the Canadian system - the complaint of long waits for procedures.

In 2002 Canadians spent \$2,250 per person on health care, while we spent nearly \$4,300 per person (with scores of millions Americans uninsured and largely unserved). Now if Canada were to spend twice what they do (or even modestly 50% more) does anyone doubt that they would have shorter lines than the USA? In fact the federal Canadian government just completed an agreement with the provinces in which they increased health care spending by \$4.12 BIL (Canadian) per year for 10 years or \$2.8 BIL US over 10 years. This raises the per capita Canadian spending about 42% and the funds were largely targeted towards shortening lines and waits -with the provinces guaranteeing set improvements in return (long-term care improvements and attacking disparities in care for aboriginals were also targeted). So we will be seeing accessibility to services become enormously quickened in the next few years.

Meanwhile in the USA certain procedures also run regularly into six month waiting lists (even though the patient has been paying into a "good" private insurance policy). For example the Boston Globe ran an article by Liz Kowalczyk on August 1, 2004 about the six month waits for colonoscopies, explaining that our market-driven system has little mechanism to adopt quickly to new recommendations. Beyond evidence of medical efficacy, capacity for a procedure in the USA always has to expand towards demand through the filters of public demand, clinical understanding that a procedure will not put their profit margin in danger (or put a nonprofit at a competitive disadvantage) and insurer willingness to pay. These are not automatic and are only slowly and indirectly influenced by even overwhelming medical evidence of patient benefit. In a system built on the principle of fulfilling the needs of health care throughout the society (rather than on what makes the major players additional profit) and under a system where government oversight is regular and strongly supported these three factors I've listed do not delay care.

VACCINATIONS AREN'T PROFITABLE ENOUGH

In the last week we witnessed another example of plain inability of market-medicine to answer health care needs, as we learned that half of our nation's closely calculated need for flu vaccine had been destroyed. The destroyed vaccine was being produced outside the US where some biomedical company had been willing to undertake the contract. The CIC's FDA in June 2003 had learned of problems in the production of vaccine in this English facility, but didn't carefully check out whether the problems had been surmounted or corrected. The FDA also failed to check back several months later before the disaster to see whether production was safe and moving towards fulfillment of the American people's need. So now we will not easily even be able to get vaccine to those most at risk (the elderly and chronically ill). The CDC calculates that the total number of US flu deaths in an average season is 36,155 (CBS news Dec 20, 2003) in seniors. So might we be looking at an extra 36,000 to 70,000 this year following poor vaccination of at-risk populations? Even the lower number would be equivalent to TWELVE world trade center catastrophes in terms of death. Talk about a breach in security!

Now that the CIC's administration bungled the June 2003 chance to save these Americans and while the manufacture of the vaccine is still not terribly profitable (not by the standards of US pharmaceuticals which are used to profit levels several times that of other Fortune 500 companies) we are hoping that the newly contracted company will come up with the needed supply at least later into the season - A CANADIAN company. Now why is it that we're hoping that a Canadian company can save our ass now? And why is it that our citizens are clamoring for the ability to order their prescriptions from Canada (against the CIC's injunctions against such re-import) but all the while the CIC still gets by blasting away at how bad the Canadian system of care is? What kind of horror of "government interference in the population's health care" was the CIC thinking of exactly during the debate? While we now hope for Canadian intervention to recover from the disasters following his nap at the wheel?

In my state of North Carolina people have been lining up at the local grocery chain stores during the last several days for the few available shots, while the nearby medical centers have not yet received a single dose to dispense even to oncology patients. Is this a problem, or is this exactly the Bush-Cheney plan, to let the corporate market place determine how health care services are going to be delivered?

INCLUSIVENESS AND COMPASSION

The only way to understand our CIC's "solutions" to our health care crisis, is that the FEHBP goes too far in organizing, overseeing and presenting private insurance plans and so should not be extended to common citizens. Oversight and government negotiation for fair pharmaceutical prices, as well as taking advantage of such negotiations already completed by our neighbors to the north, is also too much meddling in the open marketplace for health care. The reason all these interventions are improper and have been fought against by his administration is that they obstruct the purpose of the system which is to make super profits for the large corporate shareholders and chief executives. Multimillion annual compensation awards for chief executives are commonplace both for health insurance and pharmaceutical industries. This purpose which alone can explain the

design of our system should not be confused with the logical reason most Americans might believe the system exists for (to serve the health needs of Americans). As the income gap between the top 20% and bottom 20% of Americans widens with every Bush administration move, so too do the needs of middle-class Americans (the 60% between the top 20 and bottom 20% let's say) for education, health care, housing and other necessities of life become more and more of an intolerable burden on that top 20% who are to be rewarded for their hard work to the full extent of the law (tax breaks which almost entirely accrue to them alone for example).

And so getting back to the health care cost escalation question, yes the CIC did mention one other factor in rising health care costs (which "surely could not be the fault of my administration" says Bush) besides the lack of free market which took the main stage. That was of course, the costs of litigation of medical malpractice and the accompanying costs of providers wanting to practice "defensive medicine". Kerry correctly explained these away in about 10 seconds though (debate 2). Exactly as Kerry stated the costs of medical malpractice account for about half of one percent of our health care costs - so even if litigation were entirely eliminated the savings would not be of any significance. "Defensive medicine" is not easily calculated as expense or possible savings, since physicians must normally try to order all reasonable tests so as to catch grave illnesses early in their development. How would the Bush administration measure which tests are medically necessary and which are excessive (defensive)? In fact, no scientific body, or government agency has ever estimated this supposed indirect cost of medical litigation. In fact defensive treatments (caution by physicians in ordering all reasonable tests) might be saving our nation billions in finding illness early on. It's not known whether without threat of suit some physicians would be overlooking reasonable and important tests for their patients. Admittedly, given that health care systems which serve the bottom-earning 80% of us are being dismantled and undermined with great haste, it is unsurprising that Bush sees savings in broadly disallowing "defensive medicine".

The disconnect of logical thought about health care issues from our CIC's positions should, of course, not trouble us much. By definition the CIC is commander and therefore never flip-flops no matter how frequently he contradicts himself. So it's not any more troubling (by same CIC logic, or lack thereof) that we are to be saved from the present crisis in health care through distrusting and then destroying our public health programs. While proposing to sweep away public protection from medical malpractice it would then also be unnecessary to propose any alternative mechanism to make certain that physicians, and health-related corporations act with the patient's best interests at heart. This is a CIC-NO-BRAINER like being extremely "pro-life", anti-abortion and, at the same time, being against approval and use of the "morning after pill" which would easily decimate our rate of unwanted pregnancies.

Of course even if we sign on with those who endorse our CIC and his new brand of logic we are still left with one troubling thought. Given that our freedom and democracy is heartlessly threatened by this internal enemy, this evil empire of government run health care -why not just forthrightly and explicitly attack medicare, medicaid, VA and social security? Why does our Commander not just honestly state that he's out to dismantle

these and replace them with individual savings? Could our CIC be too modest to take credit openly for defeating this greatest threat to our freedom in modern times? And still he's bold enough to pre-emptively attack a sovereign nation that poses no military threat and to march around in a flight suit on an aircraft carrier announcing "Mission Accomplished" 1,000 American deaths and 8,000 casualties ago.