



Mike McCollum

Emily Lewis, a Santa Cruz County public health nurse, enlists the support of Zacarias Silva, of Watsonville, during a petition drive for single-payer health care at Kmart.

Single-payer health care bill picks up local support

By CHELA ZABIN
STAFF WRITER

Over the last couple of weeks, much media attention has been focused on the perceived strengths and weaknesses of President Clinton's health care plan. But outside the limelight, support has been gathering nationwide for a bill, introduced by Rep. Jim McDermott, D-Conn., that proposes even greater change.

McDermott's bill would put a single-payer system into place. As defined in the bill, HR1200, the system would provide universal coverage, paid for by the government. The bill provides for some tax increases, mostly on large corporations and the wealthy, but proponents say the savings achieved by skipping the middlemen — health insurance companies — would be tremendous.

HR1200 has some 60 cosponsors in the House. The Senate version of the bill, introduced by Sen. Paul Wellstone, of Minnesota, has been less enthusiastically embraced, with only a handful of sen-

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ators signing on.

Annette Dow, co-coordinator of the local campaign for single payer, said it's McDermott's belief everyone in the United States could be covered for what the nation is already spending on health care.

Support for the bill is being organized on a grassroots level by two national organizations: National Health Access and Neighbor-to-Neighbor.

In Santa Cruz County, the Campaign for Single Payer Health Care, which is loosely tied to

Neighbor-to-Neighbor, boasts a core group of 50 to 60 people who regularly attend meetings, and a phone tree of 150 to 200 people. Its main desire, Dow said, is "to make 'single payer' a household word."

"The media isn't covering the issue very well," Dow said. "A lot of people have never heard of single payer. Doctors aren't even up on what's going on."

To spread the word, volunteers have been manning tables at Bookshop Santa Cruz and the Cabrillo College Farmers Market. Ta-

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bling in Watsonville, organized by the Pajaro Valley Branch of the Women's International League for Peace and Freedom, has just begun.

Dow and other supporters of single payer are generally happy with the types of benefits Clinton has included in his proposed plan. But along with other critics of the Clinton plan, they question the savings he believes he can achieve.

"Even his chief economic adviser is questioning his figures," she said.

Emily Lewis, a Santa Cruz County public health nurse, supports single payer in part because she doesn't think it's fair to make employers shoulder the burden of health care. Those costs, which she estimated as 25 to 40 percent of a worker's salary, are "one reason for the high unemployment rate in this county."

Lewis said nearly all of the nurses she works with favor single-payer.

"I don't think health care should be linked to whether one is employed," said Jeanette Hines, a

Santa Cruz nurse active with the California Nurses Association, which supports single payer. Hines said she's worried that the Clinton plan, because of its hodgepodge method of financing, would end up being "multi-tiered" on the benefits end.

Single payer, she said, "is the only thing that makes any sense. It provides universal access to health care without having to jump through all kinds of hoops."

Hines argued that the profit-making motive needs to be removed as the driving force for the provision of health care if costs are to remain low.

"We pay more per person than any other country, and what have we got to show for it?" she said. Sure, the United States has succeeded in developing amazing technology and drugs, she said, but in terms of infant mortality rates, or even in terms of life expectancy, "we don't show up very well."

Hines said the health-care system is "just a big mess ... I don't think putting a Band-Aid on it will work. I think we need drastic, drastic surgery in order to make it work for all people."

Among the comments supporters frequently hear about single

payer is that instituting it would be a bureaucratic nightmare.

"Right now, there's 1,300 to 1,500 private insurance companies, each with its own billing department, marketing plans and policies," Dow said. Switching to single payer would be "one of the biggest bureaucracy-eliminating programs in the country," she said.

In fact, according to a recent Newsweek article, the United States spends 20 percent of its medical costs, or \$167 billion a year, on administration. Canada, which has a government-run system, spends 10 percent.

The General Accounting Office recently estimated that the country would save \$67 billion a year in paperwork alone by switching to national health insurance.

The Newsweek article profiled the health-care delivery system in Rochester, N.Y., which is, in effect, a single-payer system. Rochester Blue Cross, which insures about 80 percent of the population, has been able to negotiate lower prices from doctors.

Although medical technology there is up-to-date, care is being delivered at a price that would come to 9 percent of the GNP, rather than the 13.4 percent the country pays now. According to the article, rates are not so low that providers are being driven away from the city.

If the cost savings achieved in Rochester were applied to the entire country, the article said, expenditures would decline by \$285 billion a year.

Some of the other features of the McDermott bill include:

- Coverage of specific preventive care, including regular mammograms, immunizations, eye exams, glasses and hearing aides.

- Coverage for home health care, dental care and prescription drugs.

- Mental health and substance abuse treatment.

- Payment incentives for medically underserved areas.

- Promotion and expansion for primary care professional training, including grants for health professions education, nurse education and a national health-service corps.

- Creation of fraud- and abuse-prevention measures and a system of quality control.

The Campaign for Single Payer Health Care can be reached by calling 427-3965.