

---

## Health Care

---

# Coalition proposes malthusian 'reform'

by Linda Everett

A powerful alliance of unions, major corporations, and education and consumer groups, along with former Presidents Jimmy Carter and Gerald Ford, has unveiled a sweeping proposal for national health care reform. The only problem is, the proposal will deny patients treatment which seems to cost too much.

At a Nov. 12 press conference, representatives of the National Leadership Coalition for Health Care Reform, including coalition president Dr. Henry Simmons, proposed an overhaul of the nation's health care system, and offered a universal health care plan which, coalition representatives said, would begin to control costs immediately by setting overall spending targets, standardizing payment rates, reforming malpractice tort law, and developing national practice guidelines.

Coalition member Walter Williams, chairman and chief executive officer of Bethlehem Steel, complained that various "managed" health care programs and competitive "market place forces" have not controlled costs. He reported that managed care programs at Bethlehem had failed to stop a 26% increase of costs between 1989 and 1990.

The coalition offers what it calls the most comprehensive plan of all, which assures everyone access to health care, through private health insurance or the coalition's "Pro-Health" plan. Pro-Health would assume the acute care portion of Medicaid, the federal program that provides health care for the poor and disabled.

Under this new plan, employers would have two options, generally known as "pay or play"—they would either provide private insurance for their workers, or offer workers Pro-Health and pay a payroll tax of 7%, matched by an employee payment of 1.7% to cover costs.

The proposal is designed to be attractive to coalition corporate members like Chrysler, Ford, W.R. Grace, Weyerhaeuser, Nynex, and major steel, food, utility, and paper businesses; these groups say they have been "devastated" by "cost-shifting"—the practice whereby physicians and hospitals make up losses from uninsured patients by increasing billings to insured patients.

The worst aspect of the proposal is the coalition's willingness to gut health care expenditures, no matter what the cost to human life. The coalition says it will cut health care costs

by more than \$600 billion a year by the end of the decade, by setting an artificial annual cap on health care expenditures for both the private and public sectors. A National Health Review Board would aim to reduce the rate of growth in health care spending by 2% each year, until it matches the rate of growth in the GNP; and that's a tough scenario as, demographically, the American population is aging.

After thus reducing health care outlay, the coalition's plan would keep total health care spending equal to, or less than, GNP growth.

### Not much interest in human life

Translated, this means that, while the plan says everybody is guaranteed health care, the only care you're actually allowed under this malthusian medical policy is that which fits the parameters of our collapsing economy.

Presumably, coalition members are well aware that our uninsured citizens also tend to be our sickest citizens; that the fastest-growing age group in this country is that of Americans over 85; and that epidemics like AIDS and untreated tuberculosis are now sweeping the country. Yet the coalition says it can carve out enormous savings by having a National Health Review Board establish annual payment rates for hospitals and doctors for services. These rates will be set at levels calculated to yield overall health care spending *within* the annual expenditure target, and nothing more.

The coalition hopes to save billions by devising uniform claims forms and electronic billing proposals and by cutting out all the alleged waste, in which are included "unnecessary" procedures and "redundant" technology. Organized Delivery Systems will allegedly cut costs by having a single provider deliver a wide variety of services, from outpatient to long-term care. For profits, the private ODS operators "would compete on their ability to manage effectively and efficiently"—as in the disastrous managed care programs, where the focus shifts from medical care to preoccupation with profits.

### Dumping the doctors

Perhaps you thought that treatment is based on what can save a patient's life. But the coalition wants to develop the "most efficient national medical practice guidelines," and against those, it wants periodically to reexamine physicians' patterns of practice, before their credentials can be reaffirmed. In that way, physicians who suggest "too costly" ways to save their patients' lives, could be drummed out of the system.

In recent years, hundreds of hospitals and clinics have closed in this country. Fully 40% of the hospitals now in existence are expected to close by the year 2000, while the population grows, and the elderly population grows fastest. We do not now have nearly enough hospital beds to care for the 45 million uninsured Americans. And we have epidemics like AIDS to confront. The coalition's "cap the costs" plans will immeasurably worsen these crises.