

Local/state News

All individuals receiving Medicare (over 65 yrs and under 65 disabled) have until December 31 to change their Medigap policies and providers for Part D, the RX Drug program. Next year has many changes in providers and programs (vendors) serving Whatcom county. My suggestion is to contact SHIBA (Senior Health Insurance Benefits Advisors) program at Whatcom Alliance for Health Care Access. This is a no cost program staffed by well trained volunteers. I will be returning to volunteering for either SHIBA or other health care volunteer opportunities at WAHA. For example, I stopped in to talk about returning as a SHIBA volunteer and found out about a new Medicare Advantage Plan which may lower my out of pocket expenses by including a drug component, vision and dental prevention coverage. Each plan needs to be researched to determine whether an advantage plan or traditional Medicare and a Medigap policy best serve the individual needs.

WAHA also has excellent services for accessing health insurance targeted at low income families not eligible for Medicaid. They are in partnership with schools throughout the county to identify potential recipients and perform community outreach. WAHA has paid staff working on assisting individuals to access state subsidized programs and the Basic Health med insurance plan. SHIBA phone- 360-715-6533, WAHA -360-715-6531.

United National Health Care for All program leader, Chris Lindberg will be honored for her efforts to promote single payer health care in Bellingham/Whatcom County on December 7, 2007. The local Jobs with Justice organization identified community leaders to be highlighted for their efforts at the Garden Street Family Center, from 7 – 9 pm. Refreshments will be provided.

Sen. Karen Keiser (D-Des Moines) has written a Washington Healthcare Proposal based on Healthy Wisconsin passed by the WI Senate in July 2007. This system was subject to a notary study by Lewin Associates who found the model saved hundreds of millions over the current system and the savings were so significant that it included a \$500 million property tax roll back.

Sen. Keiser's proposal would expand the successful Public Employees Benefit (PEBB) program to cover most Washingtonians.

Currently, PEBB conducts an RFP and contracts with several insurance plans in each county.

Benefits are the same for each plan.

Each year, enrollees pick one of the plans available in their county.

The plan would all except : people covered by Medicaid, Medicare, VA and CHAMPUS

New residents wouldn't be eligible for two years.

When implemented, over 98% Washingtonians would be covered.

Savings in using this plan would be due to a larger purchasing tool, lower administration costs, bulk purchasing of RX drugs, etc.

The plan isn't a single payer program, but an interesting proposal for using an existing state government program to extend coverage to state residents. I don't know if this proposal will be introduced by Sen. Keiser in the '08 Legislative session. I have several pages of explanatory program material for interested League members.

Presidential Candidates

Obama Criticizes Rivals on Health Care

The Washington Post
November 21, 2007

“When Senator Clinton or Senator Edwards say they’re going to mandate health care, but they haven’t talked about either how to enforce it, or how to make it affordable to people, then it’s not really a mandate. Anymore than if we mandate that people get car insurance. But (if) they can’t afford it, they just don’t get it,” (Sen. Barack) Obama said.

“Senator Clinton’s health care plan covers every single American. Senator Obama’s does not. Any health care plan that leaves 15 million Americans uninsured cannot be considered universal,” said (Clinton spokeswoman Kathleen Strand).

Bill Richardson Talks Up Health Plan

Associated Press
November 21, 2007

Speaking at Rivier College, which offers nursing degrees, (Gov. Bill Richardson of New Mexico) said he isn't completely opposed to the kind of government-run, single-payer system used in Canada and many European countries, but prefers to give consumers a choice.

“I’m starting to warm up to it a little bit because I get very frustrated with insurance companies. ... They tick me off, and I wish I could say, ‘You’re out of this business,’” he said. “The problem with that is, fundamentally, I believe every American deserves choice.”

Richardson said he'd rather control the insurance companies and force them to do the right thing. He also said he worries that a single-payer system would create an overwhelmingly complex bureaucracy.

"I hate bureaucracy," he said.

"If you hate bureaucracy, how can you like HMOs and insurance companies?" Richard Ingram called out from the audience.

"That's called a left hook," Richardson joked.

<http://ap.google.com/article/ALeqM5gNrYvAi-WwpRBCdw1Ry9fxZZas4QD8T1O61G0>

Comment:

By Don McCanne, MD

There seems to be a consensus that the Democratic presidential candidates are leading on the issue of health care reform. But what are they leading with?

Except for Dennis Kucinich who advocates for a single payer national health program, all of the candidates support choice in the private health insurance market (albeit some would also include a competing public insurance program that would fail due to adverse selection). The well-recognized fundamental flaw of using private plans is that the insurance industry can no longer provide reasonably comprehensive plans that are affordable for average-income individuals (without resorting to near-fraudulent underinsurance programs).

Sen. Clinton ignores this and pretends that you can simply require individuals to buy bona fide plans that they cannot afford. Sen. Obama does acknowledge this problem but pretends that tweaking our system will make plans so affordable that everyone will want to buy them. Neither approach can possibly provide affordable, comprehensive care for everyone. By rejecting the single payer approach of creating an equitably-funded universal risk pool, they have both abandoned any hope of achieving affordable health care for everyone even before the real process for reform has begun.

Gov. Richardson also uses the conservative/neo-liberal framing of "choice" (phony choice of private marketplace health plans that take away your real choices in health care) because of concerns about political feasibility of the progressive framing of "choice" (real choice of health care professionals and facilities under a universal, publicly-financed system). But he does seem to understand the line between politics and policy as he let slip his actual views about single payer, and about the private insurance industry about which he wishes he could say, "You're out of this business."

And his comments about hating bureaucracy? Maybe it's time to give all of the candidates a left hook - not a knock-out blow, but just enough to shock them into reality.

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The above candidate info is from the pnhp.org website. This is a national group of physicians promoting a single payer program to achieve universal coverage. HR 676 legislation introduced by Rep. Conyers (D.CA.) now has 70+ sponsors and several labor unions and the California Nurses Association.

This is all for now. Happy Holidays to all, Jo Pullen