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In lawmakers' hands

Monday, 26 October 2009

By Mike Bodine Register Staff 10-24-2009

What is happening in Washington with health care reform – but more importantly, what will it all mean for the residents of Inyo County? In this last installment of a series of stories on reform, The Inyo Register reports on what is going on in the reform trenches and the people writing the legislation – laws that some have called the most important of their lifetimes. There are reportedly more than a dozen health care reform bills being introduced and passed around – some nonsense, some being merged together – all for what will be part of a broader health care reform initiative to be introduced by the Obama Administration later this year. The push for reform, and reform right now, is evident in the numbers. According to the Office of the Actuary in the Centers for Medicare and Medicaid Services, in 2007, Americans paid an average of \$7,439 per person or, \$2.26 trillion on health care – more than any other industrialized country in the world. Americans spend as much on health care as they do on durable goods such as cars and furniture. In 2006, health care costs made up 16 percent of the gross domestic product, an increase of 6.7 percent over 2004 spending. At the current rate, health care will comprise more than 20 percent of the GDP by 2017.

But, no matter how complex and overwhelming the reform may be, tiny Inyo County should still be a part of President Barack Obama's plan. As stated on the government health care reform Web site, "It (health care reform) will provide more security and stability to those who have health insurance. It will provide insurance to those who don't. And it will lower the cost of health care for our families, our businesses, and our government."

However, the latest news from Capitol Hill is that lobbyists and special interest groups are rubbing each other's backs, dividing up the reform pie – business as usual. And, the huge amounts of money being spent are an indication of what is at stake.

For example, the Pharmaceutical Research and Manufacturers of America is reporting spending nearly \$7 million in lobbyists from July through September, 2009. In the last nine months, PHRMA has spent more on lobbying than it did in all of 2008.

There are six registered health care lobbyists for every member of Congress, and only five each for financial reform.

USA Today reported on its Web site late Wednesday, Oct. 21, that drug company lobbying groups have spent \$130 million on TV ads this year. In comparison, the Obama campaign spent \$70 million on TV spots in 2008 to win the Democratic presidential nomination. Smaller advocacy groups, like mom-and-pop businesses, are outnumbered when competing with these kind of dollars.

The Guardian newspaper of London found even higher numbers. On Oct. 1, it reported that industry and special interest groups have spent more than \$380 million on lobbying and direct contributions to members of Congress. Senate Finance Committee Chair Senator Max Baucus (D-Mont.) allegedly received the largest single contribution of \$1.5 million. Fellow committee member Liz Fowler – former vice-president of Wellpoint, one of the largest insurance groups in the nation that could profit plenty off a plan requiring millions of people to get insurance – is drafting much of the language in Baucus' latest bill.

Also on Wednesday, Oct. 21, Democrats backed away from supporting a 10-year freeze on cuts to Medicare reimbursement to doctors. This has been reported as a way to get doctors' support for the bigger reform initiative.

There is no lack of public display when it comes to reform, either. The Democratic National Committee's Organization for America rallied its troops on Tuesday, Oct. 20 and flooded Capitol Hill with more than 200,000 phone calls, urging lawmakers to get the reform passed.

On Oct. 7, activists from the group Health Care for America Now set up a mock crime scene in front of five Anthem Blue Cross offices in California. Yellow police tape and piles of bodies were used to symbolize the 45,000 annual deaths in the U.S. caused by a lack of health insurance, according to the organization.

The organization's statistic is backed up by several other sources. A spokesperson for Health Access California said in a press release, "One person dies every 12 minutes because they don't have affordable health care, and 64 percent of all bankruptcies are caused by medical debt."

And, in an unprecedented move, the progressive group, Americans United for Change, is running ads in Nevada that give Senate Majority Leader Harry Reid (D-Nev.) a pat on the back for keeping the public option alive. The ad hints that Reid will be supported, in the next election, if he supports the public option. Most lawmakers are still on the fence when it comes to the public option.

A public option would be a federal alternative to private insurance, which, theoretically, would create competition for companies driving down rates and premiums. One public option idea would be to have all Americans eligible for Medicare.

But, what health care reform will actually look like is anybody's guess at this point. There are several biased, and some unbiased publications and organizations, keeping close tabs and trying to make sense of the reform legislation. The Christian Science Monitor, procon.org and Rueters are some examples of where to find the latest news about the reform issue.

Most experts analyzing the issue agree it is unclear what Republicans and Democrats really want from a reform bill other than their own and their constituencies' best interests.

Through the smoke and mirrors and backroom deals, some information can be procured as to what can be expected from health care reform – at least what has been said, not necessarily promised. On the administration's Web site, www.healthreform.gov, there is information about what reform will mean for



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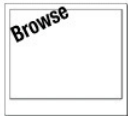
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each individual state, as each state deals with a different set of circumstances and challenges. For California, there are sections describing why the state cannot wait any longer for reform. For example, there are increasingly fewer Californians with health insurance and fewer employers are offering insurance. These new figures do not include the recent rash of job layoffs due to the recession. More than 19 million people in California get health insurance on the job, where average family premiums are approximately \$13,297, roughly the annual earning of a full-time minimum wage job. It is hoped that health care reform will allow more employers in Inyo County to offer affordable insurance, for themselves and their workers. Reform and the recent federal stimulus bill should allow for technological upgrades to bridge the "ultra-rural" gap of access to specialists in the area. According to panel discussion among local health care professionals sponsored by the League of Women Voters on Thursday, Oct. 15 and a published research paper on rural doctor retention, more medical dollars in Inyo County could mean that more doctors will want to practice and stay in the area. Medicare reimbursement reform could mean that more doctors and suppliers would accept more claims and help more people. Whether this is all speculation, remains to be seen until the legislation is, if ever, passed.

While Medicare, insurance reform and a public option have received the bulk of attention from the media, there are many facets to health care and reform. Some of these other areas include: illegal immigrants and their rights; the health care, mental and physical, offered and provided to veterans returning from Iraq and Afghanistan; the plague of preventable diseases, like obesity and smoking, washing across the nation; or major retailers such as WalMart that offer no employee insurance, and even encourage their employees to seek out state-sponsored health care – all costing tax payers millions, if not billions of dollars.

Experts say the best advice that can be given concerning health care reform is to stay vigilant and informed about what's going on from as many sources as possible.

And the next piece of advice would be to contact elected representatives and tell them your views and what you want from a reform plan. It is your health care that your elected officials are deciding upon.

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