

Single-payer health care

At Temple University Hospital in Philadelphia, a 60-year-old woman has been hospitalized for weeks suffering from heart failure. Patricia Eakin says she should not have been in the hospital in the first place.

But the woman is there, at great expense to the hospital and—because she lacked health insurance—ultimately to taxpayers. That's because with no insurance, she did not have enough money to buy enough medicine to prevent or slow the heart disease.

"She had to take it every other day, and not every day, as the prescription said," said Eakin, who is also president of the Pennsylvania Association of Staff Nurses and Allied Professionals, an independent statewide nurses union. "Now she's in the hospital and it'll cost thousands of dollars."

It's cases like that of the woman in Philadelphia, or a 3-year-old hemophiliac child in Colorado whose medical bills are approach-

ing his father's company's lifetime limits on health care coverage, that sent advocates of government-run single-payer health care coverage to Washington in late January to raise the visibility of their cause.

And their timing was perfect, as health insurance—or lack of it—rose to the fore again, due to anti-worker GOP President George W. Bush.

That's because Bush's Jan. 23 state of the union address called for taxing what he termed "gold-plated" health insurance, but also for giving a tax deduction—more usable by wealthier taxpayers—to individuals for their first \$7,500 in yearly health insurance spending and \$15,000 for families' spending.

His scheme drew scorn, and more, the next day from the single-payer advocates. They said it would only throw more people into the ranks of the uninsured, while lining the pockets of the insurance companies. And even Bush's White House admitted his de-

ductions would only help at most 3 million of the 47 million uninsured—and none of the "underinsured," like the father of the hemophiliac child.

By contrast, they said, their plan, HR 676, the government-run single-payer health care bill crafted by veteran Rep. John Conyers (D-Mich.), would help everyone. The bill, co-sponsored by Rep. Dennis Kucinich (D-Ohio) and 40 other lawmakers, is one of a raft of competing health care proposals—including Bush's—floating around Washington.

HR 676, which then had more than 75 backers, died at the end of the last GOP-run

Congress without a hearing, but Kucinich told a Jan. 24 press conference that after it is reintroduced, he'll schedule a House subcommittee hearing on it, possibly in April.

The advocates, led by Deborah Burger, President of the California Nurses Association, and Dr. Oliver Fein of the

Physicians for a National Health Plan, contend a government-run single-payer plan would cut costs, eliminate the health insurance companies and their paperwork, denial of coverage and high overhead, and cover everyone, including the uninsured and underinsured. Bush wouldn't do that, they added.

And it wouldn't help people like the 60-year-old woman in the Temple University Hospital, added Burger, herself a 35-year veteran nurse for California's Kaiser Permanente, who's a diabetes case manager.

"We see, in many cases, that one little thing that hasn't been done has a snowball effect" on patients, their health, their quality of care, and, ultimately, medical costs. Burger explained. "When they can't take their medicine, for example."