

October 10, 1990

This enclosed article reflects my views and I think millions of other Americans. In a sense, you in Congress have sold the American public "down the river." This travesty against the sick, elderly, and feeble would make even Jesse James blush, if he were still alive; and compared to the Savings and Loan scandle, look like a common 7-11 robbery.

You have created a Brahman class in America, consisting of doctors, hospitals, politicians, insurance companies, and pharmaceutical companies, which will leave the majority of Americans beggars and paupers.

Literally, common wealth includes all the people. My fervent hope is that the next election can produce representatives that will honor this principle.

Enclosure

3394-90


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OCT 15 REC'D

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OCT 20 ANSD

Submitted to Senate Finance Committee and Florida Congressmen.

Even the comics show us why Canada's health care is better



■ Martin Dyckman

John and Elly Peterson, a couple contentedly approaching their 40s with two growing children and jobs they both enjoy, did not expect to be having another child. If you read the comic pages, you already know the rest. Elly is pregnant. Cartoonist Lynn Johnston, creator of the delightful strip *For Better or For Worse*, had the doctor break the news to Elly last month. She fainted. Since then, she and her husband have happily adjusted to the situation.

The only complication so far was that the doctor's office was crowded and Elly had to wait. After the examination everything went smoothly. There were no financial forms to sign on the way out. There was no hassle over the doctor's fees or the hospital charge. In St. Petersburg, Elly could expect to pay anywhere from \$5,500 for a normal delivery to \$9,700 for a Caesarean section, but she doesn't live in St. Petersburg.

The cost, says Johnston, is "something I never thought about."

Not that she would have to. Johnston is Canadian. So are her characters. Canadians don't have to worry about how to pay for their babies, or for any other essential health care. Health care is a benefit of citizenship. The government levies substantial taxes to pay for it, but Canadian babies are born healthier and can expect to live longer than babies in the United States, where as many as 37-million Americans — most of them young — have no health insurance and 50-million more do not have enough. But though all Canadians are covered, they still spend significantly less on health care: 8.7 percent of gross national product, compared to 11.5 percent for the U.S. system that has such gaping holes in it.

A recent study showed that individual Canadians get almost twice as much health care for dollar spent.

Their doctors and hospitals charge less. More of them are general and family practitioners, fewer are specialists. They have less paperwork, fewer regulations and almost no insurance companies to take a cut off the top. Their hospitals are non-profit. Malpractice insurance also costs a lot less, which might be the case here if the health care industry hadn't invited trouble by pricing its services so high.

"One of the really fun things about the system," Johnston told me over the telephone recently, "is that people who would not normally go for medical help, on account of the expense, go, especially pregnant mothers. We have extremely good medical care here." The chief complaint among Canadian women, she added, is that their doctors are too fond of surgical deliveries, which is why she is thinking of having Elly deliver at home under the care of a nurse-midwife.

If that suggests too high a level of medical service, it's a problem millions of Americans have come to envy. In the world's richest country, pregnant women do without prenatal care simply because they are poor. A baby born in Hong Kong has a better chance to survive than a baby born in our nation's capital. For society's refusal to spend a little money in advance, we allow our neonatal intensive care wards to fill up with brain-damaged babies. Because we can't cope with the thought of so-called socialized medicine, we let our emergency rooms fill up with dead and dying people who, had they gotten ordinary medical care, wouldn't be sick at all.

Last Sunday, my colleague Carol Gentry revealed a particularly wicked development. Proprietary hospitals and for-profit health corporations, she wrote, are paying up to \$500,000 to buy up the contracts of obstetricians who are working in rural communities or among the urban poor as part of the National Health Service Corps in order to repay their government scholarships. If the profiteers can afford to pay so much simply to buy out a contract, how much is the paying

FOR BETTER OR FOR WORSE



For Better or For Worse, © 1990 Universal Press Syndicate, reprinted with permission

Lynn Johnston, who draws "For Better or For Worse," says she never thought about the cost when she had one of her characters get pregnant. Johnston is from Canada.

public being overcharged? A more gruesome consequence is that babies will be dying in the migrant shacks and in the *barrios* because the doctors who would have tended their mothers are catering to wealthy women instead.

Americans want a system like Canada's. Every poll shows it. By now, the politicians who read their mail don't need polls to tell them that. But Congress is owned by the insurance industry and the American Medical Association, so it aims for half-measures that are doomed to fail for two reasons: They would shift the cost burden to small business, which can't afford it, and they would not control costs. The Canadian experience shows that the only way to control costs is to put all the medical money in one pot and tell the providers, "This is it. That's all there is. How shall we divide it?"

We might have a national health care system now if Congress hadn't split the constituency by giving the elderly their own program. But the elderly are

discovering how lonely it can become when the government needs to save money in a hurry. They are beginning to realize how much it is in their interest for the country to adopt a national health system that covers younger Americans too.

"I believe that the Canadian system is the direction in which we will be and should be moving over the next decade," Sen. Bob Graham, D-Fla., said Thursday in the course of outlining his objections to the severe Medicare cuts in the proposed budget compromise. "If there is any positive benefit out of the high level of attention Medicare is getting it may be to accelerate the time we get to that destination."

Even an ill wind blows some good. The budget crisis marks the first time Graham has endorsed national health care.

It is an issue that could carry him — or any other politician who dares to use it — to the White House.

■ Martin Dyckman is chief editorial writer for the St. Petersburg Times. ■