

LAW & MEDICINE

Has the Time Come for Universal Coverage?

With Sen. Edward M. Kennedy (D-Mass.), a staunch supporter of patient rights and health care, now battling brain cancer, the subject of health care in our nation becomes all the more poignant. In a two-part series, we will consider this important issue.

Our present health care system is broken, and we need an updated model. A March 17, 2008, Fortune magazine article reported that the United States now has 47 million uninsured residents, and that, according to the Department of Health and Human Services, health care expenditures will double by 2017, to \$4.3 trillion. And even though the United States is the richest country in the world, the World Health Organization recently ranked it 37th in terms of health care quality and fairness.

Health care is a top-tier issue for our presidential candidates. The American electorate demands change in the health care system. This time, whoever takes the Oval Office must ensure that change comes about so that all Americans are provided adequate health care at affordable prices.

The first question to be answered is: Should all Americans be entitled to health care? It is a simple question but one that has produced considerable debate, because we as a nation have never considered health care to be a right. Should it be? If it should not become a fundamental right, should some Americans—such as children—have health insurance coverage guaranteed to them?

The permutations are many, but there is only one right and fair choice: All Americans, including those taking overt steps to become citizens, should be provided health care. This is necessary for many of the same reasons that led to Medicare's passage in 1965: The crisis is as widespread and pervasive today as it was in the years preceding Medicare's enactment, and some type of relief is warranted on a national level, but for all U.S. citizens—not just for seniors.

Who should pay for that care is an important issue, but the answer to this question should not be the engine that drives the car. Instead, we should declare that all Americans should have access to health care, and then figure out a way to achieve that goal.

The two major-party presidential candidates, Sen. John McCain (R-Ariz.) and Sen.

Barack Obama (D-Ill.) have very different approaches to the problem. Sen. McCain declares himself to be a free-market guy, believing that governmental intervention proposed in Democratic plans would be shackled with "inefficiency, irrationality, and uncontrolled costs." A fundamental principle of his plan is that no American should be required to buy health insurance.

As noted in the Fortune article, Sen. McCain says his plan would "tax employer-sponsored health insurance, and use the money to provide tax credits (up to \$5,000) for individuals and families to shop for coverage on their own," thereby "forcing insurance companies to compete head-to-

head for customers" and ostensibly lowering prices. He has also proposed a creation of a Guaranteed Access Plan to help ill and high-risk patients—who otherwise would find coverage very expensive or impossible to buy—obtain "coverage of last resort." He also would not require insurers to sell policies to those with preexisting medical conditions. His message makes for nice sound bites but the devil, as always, is in the details.

The underpinning of McCain's plan involves the elimination of the tax break that employees now receive when their employer provides their health insurance. The employee would have to pay tax on the cost of an employer-provided plan for that employee or his family. With the federal dollars saved by eliminating the tax break, McCain would provide a \$2,500 federal tax rebate for individuals and \$5,000 per family that could be used toward the purchase of private health care policies. Sen. McCain expects that this would result in many fewer people opting for employer-sponsored health benefits.

In addition, Sen. McCain would allow the individual to purchase the health plan that best fits his or her stage in life, allowing insurers to offer an array of plans, with various benefits, copays, and deductibles. As one writer has observed, however, the downside is that "he risks leaving the poor and sick behind" (although one McCain lieutenant says the tax credit would be increased for that patient population).

Sen. Obama describes his plan as providing affordable and portable health coverage for all and lowering costs by modernizing the health care system. Specifically, he would require that no American be turned away from any in-

surance plan because of an illness or a pre-existing condition. Americans would receive benefits similar to those that Sen. Obama and other members of Congress receive through the Federal Employees Health Benefits Program. He also calls for a National Health Insurance Exchange to assist individuals who wish to purchase a private insurance plan.

Employers that do not offer or make a "meaningful" contribution to the cost of quality health coverage for their employees would be required to contribute a percentage of payroll toward the costs of a national plan, although some small employers would be exempt from that requirement. Parents would be required to provide coverage for their children.

For physicians, Obama's plan would strengthen comparative effectiveness research by establishing an independent institute to guide reviews and studies, giving physicians and patients up-to-date clinical information. Another part of his plan would strengthen antitrust laws to prevent insurers from overcharging physicians for their malpractice insurance and would work to improve systems that eliminate errors in patient care and safety. Again, nice bullet points, but crafting all his points into a workable solution for a majority of Congress will take some doing.

In our next column, we will look at what U.S. history and health plans in other countries can teach us about health reform. ■

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BY MILES J. ZAREMSKI, J.D.

INDICATIONS

Know Your Enema

Here in the Washington area, we're a bit jaded when it comes to monuments. But there's a new statue in Russia that definitely caught our attention. Located at the Mashuk-Akva Term spa in the southern city of Zheleznovodsk, the 5-foot-tall bronze syringe bulb supported by three cherubs is a tribute to everyone's favorite medical procedure, the enema. Sculptor Svetlana Avakina, who designed the \$42,000, 800-pound anal monument, told Reuters that "an enema is an unpleasant procedure, as many of us know. But when cherubs do it, it's all right." The Caucasus Mountain region has dozens of spas that routinely administer enemas from the area's mineral springs. There are so many spas giving so many enemas that Alexander Kharchenko, director of Mashuk-Akva, told the Associated Press that "an enema is almost a symbol of our region."

The Walking Wounded

There's a war going on right now, and we're not talking about the war on terror. This war is being fought on the golf course, and it pits golfers who use carts against those who walk. Researchers at Sweden's Karolinska Institute noticed that the death

rate among golfers is 40% lower than the rest of the population, which means they're living about 5 years longer. Professor Anders Ahlbom, coleader of the study, said, "A round of golf means being outside for 4 or 5 hours, walking [not riding] at a fast pace." That the walking involved in golf is healthy comes as no surprise, especially to people who use carts. According to another recent study (*Am. J. Prev. Med.* 2008;35:55-9), the rate of golf cart-related injuries rose more than 130% from 1990 to 2006. Coincidence? We think not. The jealous cart users are obviously conspiring to eliminate their walking cohorts. And now they've got carts that are faster and more powerful to chase them. And they even have cart-based GPS systems to track them down! And the things run on electricity, so you can't even hear them coming! So, now do you want to hear how aliens are controlling the price of oil?

Downsized by Fruit

Somewhere, a Keebler elf is crying. The mothers of America have broken his heart. According to a report in *USA Today*, the most popular snack for children under 6 years old is no longer cookies. More kids are now eating fruit than they are any other snack, with cookies holding the No. 2

spot. NPD Group Inc., a market research company, compared food and beverage journals kept by 500 mothers in 1985-1987 with 600 journals from 2005-2007 and found that young children are more likely to eat fruit rolls, yogurt, and granola and less likely to eat ice cream, candy, and cake. "If this keeps up, we're going to have to lay off American elves and shift production to India or Mexico," Head Elf Ernie said in a statement. Where have you gone, Cookie Monster?

Think and You Shall Receive

This is how "Planet of the Apes" began, right? With Charlton Heston jabbering something like, "Get your stinking robot arm off me, you damn dirty ape!" The University of Pittsburgh reports that a monkey has fed itself by using a robotic arm controlled solely with signals from said monkey's brain. A probe the width of a human hair is inserted into neuronal pathways in a monkey's motor cortex. The neurons' activity is then evaluated with a mathematic algorithm and sent to the arm, according to the minister of science, Dr. Zaius. The robot/monkey team hopes that its work will benefit people with spinal cord injuries and those with "locked-in" conditions such as amyotrophic lateral sclerosis, or Lou Gehrig's disease, said team leader

Cornelius. When asked about his part in the project, the head monkey/test subject was certain that people would be able to repeat his performance: "You know the saying, 'Human see, human do.'"

Botox at Sea

Does anyone out there remember "The Love Boat"? If you do, then you certainly remember the show's theme song. If you don't, go find it on YouTube before you read any further. That's okay, we can wait. All right, is the song running through your head now? Good. Now try these alternate lyrics:

*Cruise, at sea there's something new.
It's Botox, they're injecting you.
Cruise, Norwegian Cruise Line.
Get Perlane, and Restylane too.*

*Treatments directed by Dr. Brad Herman,
A Miami-based, certified plastic surgeon.
"Our spas are the best at sea,"
Said CEO Colin Veitch.*

*And fill your cruise vacation,
With eating and microdermabrasion.
You're next!
Welcome aboard.
Botox!*

—Richard Franki