Health and hospital crisis: The buck stops nowhere

by Warren J. Hamerman

Ronald Reagan’s farewell budget targets inner city teaching hospitals, Medicare, and Medicaid because they, in the words of an administration spokesman, “continue to be the primary engines driving excessive budget growth.” The incoming Bush administration is expected to adopt this area of the budget as it inherits it.

Medicare is the health insurance program for 31 million older Americans and 3 million other disabled persons, and Medicaid is a federal/state health program for the poor. The budget notes that Medicare spending would grow at a rate of almost 14%, without any legislative changes, while Medicaid would grow at a rate of about 9%. Therefore, the outgoing Reagan administration has deliberately shaped the $424.4 billion Health and Human Services budget to force the Congress to change the law. They have proposed $106.1 billion for Medicare, some $3.5 billion less than should have occurred under current law. Their budget calls for $36 billion for Medicaid, an increase of nearly $2 billion, but still $2 billion less than under current law.

The anti-health bias in the federal budget is sure to accelerate already out-of-control health holocaust conditions in the nation’s cities. In the case of New York City, on-the-scene medical professionals documented hospital and health conditions worse than in the Third World’s worst hellholes in a four-day front-page series in the New York Post during the first week in 1989.

Dr. Nabil Atweh, the former director of the Kings County Hospital emergency room in New York City, characterized the conditions in the hospital in the following terms: “This is worse than Beirut. I worked in Beirut... Beirut has much better conditions.”

Dr. Barry Liebowitz, the head of New York’s Doctors’ Council, a union that represents 3,000 city hospital and Health Department doctors, added, “Unless something is done, we will have a Calcutta on the Hudson. We will have to triage out in the street.”

Dr. Benjamin Chu, the acting director of the Kings County Emergency Room, commented, “We were just appalled at how overcrowded everything had gotten... We looked over...
the charts. And we picked out these four deaths—pneumonia, cardiac arrests. We picked those four because their deaths occurred when the ER [emergency room] was absolutely overcrowded."

**Politicians blame each other**

At a City Hall press conference on Jan. 3, Mayor Ed Koch tried to excuse the city on the grounds that there was not enough money: "Do you know of any service in this city that has enough resources? There is not a service in this city that has enough resources, because there isn’t enough money."

His hospital chief, Dr. Jo Boufford, repeatedly blamed the state for cutting its budget allotments to the city and creating what she characterized as "medical gridlock." State Health Commissioner Dr. David Axelrod lashed back, "The state just can’t print money."

An Axelrod spokesman added, "Increasing AIDS and drug abuse-related illnesses, the absence of adequate prenatal care and acute shortage of nurses... Diseases and conditions traditionally associated with poverty are playing a bigger role... No one has successfully begun to deal with that—either the state, the federal government, or the city."

Mayor Koch counterattacked, "Only the state of New York can authorize an increase in nursing beds and an increase in the reimbursement rate. I urged them to do that. They declined."

In the midst of the charges and countercharges, experts have confirmed that Lyndon LaRouche’s call for hospital construction is the key issue.

Said Doctors Council president Liebowitz, "The major cause of the crisis was the state’s reduction in hospital beds. They wanted to close 5,000 beds, and did close 2,000 or 3,000... At the same time there was a greatly increased demand for services." Liebowitz pointed out that back in the 1970s, Gov. Hugh Carey closed state mental hospitals but never built the ambulatory care centers he promised to build. "He littered the streets with mentally ill homeless," charged Liebowitz.

Joseph Lisa, chairman of the City Council Health Committee, added, "I attribute this directly to the policies the State Health Commissioner Dr. David Axelrod has pursued for the last eight years of eliminating hospital beds, and this has happened while each year the AIDS epidemic has become more visible. It is bordering on criminal negligence to have created a hospital shortage of this magnitude."

Robert Gumbs, executive director of the city- and state-funded Health Systems Agency, said, "The causes of the crisis include AIDS, psychiatric and substance abuse problems, and the health personnel shortage. I blame both city and state government for not responding quickly enough to the crisis."

The overall message which the budget-cutters and hospital administrators wish to convey is that the buck stops nowhere—because there are no bucks.