

Universal Health-Care Proposal Reintroduced In Congress

by Patricia Salisbury

On Jan. 25, less than 48 hours after President Bush included a fraudulent health-care proposal in his State of the Union Address, Rep. John Conyers (D-Mich.), joined by Rep. Dennis Kucinich (D-Ohio) held a press conference to announce their reintroduction of HR 676, the United States National Health Insurance Act, or the “Medicare for all” legislation, as it has come to be known.

Although Conyers could not attend the press conference because of pressing House business, Kucinich, who has acted as the legislation’s “whip” in previous sessions in Congress, spoke for both at the press conference. In addition, in pre-released remarks Conyers made it clear that he and the coalition supporting universal single-payer health care, completely reject the Bush proposal. Denouncing the Bush plan as a gimmick, Conyers scored Bush’s promised relief as illusory.

At the press conference, Kucinich began referring to aspects of the current health-care system as “barbaric,” and emphasized the fact that HR 676 stands alone in meeting the three broad criteria that any viable health-care legislation must meet; the challenge of quality, accessibility, and cost.

He elaborated by outlining the basics of the legislation which address these challenges. HR 676 provides that all U.S. residents would be eligible to receive a National Health Insurance card. The card would be good for health-care service at all health-care facilities across the country in the National Health Insurance system. Families would be able to choose any licensed doctor and any participating hospital. There would be no premiums, deductibles, or co-payments. Therefore, the dependence of citizens on their employers for health insurance would be eliminated. The bill would also eliminate the situation in which people are at the mercy of rapacious HMOs for treatment, since it provides that all medical institutions in the system must be not-for-profit, and will be strictly monitored for their quality of care.

In April 2006, economist Lyndon LaRouche endorsed the then-current version of HR 676 saying: “The actual or virtual obliteration of pre-existing, private pension and re-

lated contractual agreements, demonstrates the folly of inducing large numbers of our citizens to place their trust, and the hope of their families’ future, in the substitution of the dubious protection of private pension and health-care systems for public measures as durably permanent as our constitutional republic itself.”

Kucinich announced that he will hold hearings on health care as chairman of the Subcommittee on Domestic Policy, Committee on Oversight and Government Reform, and he called for a continued grassroots mobilization.

Bush Plan Termed ‘Obscene’

Also present at the press conference were members of the coalition that has mobilized for the legislation on the grassroots level, most notably, Physicians for a National Health Program, Healthcare Now! and the California Nurses Association. United in their commitment to HR 676, these panelists took the opportunity to present a devastating critique of the Bush health-care proposal. Deborah Burger, President of the California Nurses Association characterized the Bush plan as “obscene,” and charged that it provided yet more tax breaks for the wealthy. She noted that it continues the reliance on private insurers, and will actually worsen the waste in the system, where 30% of the money nominally spent on health care actually goes into administrative costs.

Oliver Fine, M.D., Professor of Clinical Medicine, and Professor of Clinical Public Health at Cornell University, who spoke on behalf of Physicians for a National Health Care Policy, also began by addressing the Bush health-care program, pointing out that only 3-4 million of the estimated 47 million uninsured in the United States will be covered by the plan, leaving over 40 million without health insurance, and another 82 million uninsured or with sporadic insurance. Dr. Fine reported that the tax on so called “gold-plated” health-care plans will actually punish those with chronic illnesses, since these are the people who have to rely on this level of health insurance. The proposal, he said, actually penalizes the sick.

Nathan Wilkes, father of a four-year-old son born with hemophilia, gave a compelling history of the impact of his child’s medical bills, not only on the Wilkes family, but on the company he works for. Just four years after the birth of his child, he is within months of exhausting the \$1 million cap on medical treatment with nowhere to turn to get the medicine that keeps his child alive. Beyond this personal tragedy, he reported the fact that the health coverage of all 97 employees of his small high-tech company has been wrecked, as premiums, co-pays, and deductibles have skyrocketed because of the claims generated by his son’s medical condition. Mr. Wilkes eloquently concluded that the only option that does not bankrupt families with similar health-care problems is the HR 676 single-payer option, which is now once again before the Congress of the United States.