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The only health-care solution: single-payer system

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The new uninsured statistics released recently by the U.S. Census provide a sobering reminder of the failures of the U.S. health-care system. In Indiana the number of uninsured has risen to 871,000: Nearly one of every seven residents lacks coverage. Even for those lucky enough to be insured, ever-skipper private policies helped push an estimated 28,000 Indiana families into medical bankruptcy in 2001. As a physician who faces our state's health-care crisis day in and day out, I support a single-payer "Medicare for All" system for Indiana and for the nation.



Nearly everyone, regardless of ideology, agrees that reform to establish universal coverage is necessary. But the most important question is "how," and here not all proposals are created equal. Because our current non-system is based on insurance companies whose natural market behavior is to compete to cover healthy people while shunning the sick, proposals that preserve our reliance on them are destined for failure: "Individual Mandates" (like the much-celebrated

Massachusetts plan) simply force the poor and near poor to buy overpriced policies that offer grossly inadequate coverage, guaranteeing an epidemic of medical bankruptcies.

Reforms, which force employers to contribute more for coverage, encourage them to cut jobs, wages or other benefits.

"Consumer-directed" health plans are nothing but a euphemism for substandard coverage, offering families no protection in the event of medical need.

Other countries have figured out how to provide higher-quality coverage to all their citizens for far less than we spend. Recent studies have detailed how Brits and Canadians have lower rates of nearly every chronic disease and enjoy superior access to care. An exhaustive 2004 study of 21 international health quality indicators in five countries found that -- despite double the outlay on health care -- the U.S. performed noticeably better on only two.

How can the U.S. spend so much more and get so much less? Anyone who has ever had to deal with the nightmarish paperwork of giant insurance companies already knows the answer: It's our reliance on private insurers.

Insurance companies stay profitable by keeping those who actually need health care from getting it. To do this, they erect a giant, expensive bureaucracy whose only purpose is to fight claims, issue denials and screen out the sick. They consume care dollars, but produce only paperwork headaches. Doctors and hospitals must maintain costly staffs to deal with insurance hassles, and businesses are saddled with the burden of administering their own health benefits. In total, this administrative waste consumes nearly one-third of our health spending.

Research has shown that streamlining payment through a single public payer could save the U.S. more than \$350 billion per year. Such a system could have saved Indiana \$6 billion in 2003. That's \$8,266 per uninsured resident, enough to provide high-quality coverage to everyone. Everybody would be covered for all doctor, hospital, long-term, mental health, dental and vision care, and prescription drugs. Patients would have free choice of doctor and hospital, and physicians would be unleashed from corporate dictates over patient care.

In the U.S., opponents resort to cries of "socialized medicine," but don't be fooled. In a "socialized" system (like the U.S. Veterans' Administration) the government employs the doctors and owns the hospitals. In a single-payer system, they stay private.

Similarly, much hysteria has been printed about alleged "rationing" of care in other nations. The truth is that the U.S. rations care more harshly than any other country. According to the Institute of Medicine's most conservative data, 18,000 Americans die every year due to lack of insurance. Millions more go without needed care due to cost. Now that's rationing. What's more, Canadians don't even wait very long for care. The median wait time for non-emergency, elective surgery was four weeks in 2005. Service was so fast that in a recent survey only 3.5 percent of Canadians reported feeling they waited too long for care. Considering we spend twice what they do, a U.S. system should be able to eliminate waits entirely.

Single-payer offers the only real solution for Indiana and for our nation. It's time for politicians to stand up to the insurance giants -- as they have in California -- in the interest of the public.

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