

Nurses' guide to single-payer reform

Shifting paradigms in health care: no place for marketplace thinking

By Sandy Eaton, RN

After all these years of campaigning for fundamental health care reform, it's easy to get discouraged and feel that this fight, if not hopeless, is at least unable to bring us to the next plateau.

I think the problem is not just David fighting a too-powerful Goliath. (After all, Question 5 almost passed when placed on the 2000 ballot despite being outspent 50-1) It's not just the power and influence of insurance, hospital and pharmaceutical interests that keep official discourse on expanded coverage limited to cost shifting and dilution of coverage.

The big problem that we need to face up to and defeat is the spreading contagion of marketplace thinking. The theory goes that all social issues can be resolved through the blind workings of the unfettered marketplace. This frame of reference hobbles efforts to make access to affordable, qual-

ity health care—including safe staffing and appropriate levels of care in the appropriate settings—universal.

Now the market place may bring us cheap, fast computers (if we ignore the social costs of exploitation of factory workers in places like Singapore and Taiwan). But health care does not work that way, and efforts to market, for example, cheap health insurance "products" that leave people on the brink of bankruptcy before they kick in do nothing more than create the image that we're really extending coverage when all we're doing is shifting costs and extending false hopes.

In the market place, there are winners and losers. But in health care, we cannot afford any losers.

The sentinel event in Massachusetts was the passage of Chapter 495, the deregulation of hospital financing, in 1991. The hospital industry, which was already experimenting with job reengineering, put the commercial

insurance industry into the driver's seat. The resulting damage to the integrity of the private sector has no comparison other than the havoc following the wholesale privatization of state, county and municipal hospitals and health services that had just begun to pick up full steam.

The marketplace mentality, with its "marketplace morality" (as Cornel West would put it), is sacred dogma to the Bush and Romney administrations, and accepted as revealed truth by too many other Republicans and Democrats. Globalization is marked by the spread of this ideology around the world. Our nursing colleagues in Canada, as well as in New Zealand, Australia, Japan and Ireland—indeed everywhere health care has been declared a fundamental human right—are fighting hard to resist the Americanization of their systems, with the emergence of profiteering and the atomization of society.

Right now in Massachusetts we have

the opportunity to join hands with our colleagues around the globe who are campaigning to maintain health care as a human right. On May 10, the state Legislature—meeting in Constitutional Convention, will be able to move forward to November's ballot the proposed amendment to make access to affordable, comprehensive health insurance the right of all who reside here. When this measure comes to the floor, it will win. When this amendment appears on the ballot, this right will be affirmed by the voters, with the help of all of us working hard to overcome the expected attack ads from vested interests.

With the constitution amended we will have a powerful tool to build a just health care system here, and something that can be replicated in other states and nationally. And we will pound a nail into the coffin of the Bush and Romney agenda of profiteering at the expense of the rest of us. ■

Your support of health care amendment needed

May 10 Constitutional Convention: Still essential, still crucial, still happening

The health reform bill that the Legislature recently passed promises that 90 to 95 percent of the uninsured will be covered within three years with affordable, comprehensive coverage. It launches an experiment to see if public program expansions coupled with market based reforms can fulfill that promise. This experiment has never been performed anywhere else and policy experts are divided over whether this approach can, even in theory, create a health care system that is both affordable and sustainable over time. The reaction of Massachusetts providers, insurers, consumer advocates, labor and business runs the gamut from jubilation through skepticism to outright opposition.

What everyone agrees on is that the reform framework enacted this week is the beginning of the debate not the end. Implementing

these reforms will require unprecedented cooperation over the next three years by stakeholders with very divergent interests as they hammer out the details. The specifics of the experiment depend on upcoming negotiations among regulators, stakeholders and advocates over benefit packages, cost, penalties and much more.

We need the Health Care Constitutional Amendment now more than ever to make sure the promise of these current health reforms are fulfilled and that we have the tools if we need them to finish the job of ensuring affordable, comprehensive coverage for every Massachusetts resident.

History tells us that legislation by itself is not enough. The employer mandate in the 1988 Universal Health Care Law was repealed before it was ever implemented.

History also tells us that even a ballot initiative for a law may not be enough. The people enacted the Clean Elections Law only to be stalled and eventually repealed by the Legislature. The only major, progressive reform that has been fully implemented in Massachusetts—education reform—has a constitutional anchor backed up by the Supreme Judicial Court.

The Health Care Amendment creates a constitutional anchor for reform that meets clear standards—affordable, comprehensive, equitable coverage. It will make sure that the promise of today's reform is fulfilled and that if additional reforms are needed tomorrow, we'll have the political and legal tools to get the job done.

The Health Care Amendment will be taken up by the Legislature on May 10. Show

your support for this important initiative by calling your legislators at 617-722-2000. Or visit www.healthcareformass.org. ■

**Join in the rally for
the Constitutional
Amendment
Noon
May 9
State House**

MASS-CARE & UHCEF invite you to the Annual Ben Gill Awards Dinner

Saturday, May 13 • 5:30 p.m.

At the Dante Alighieri Cultural Center
41 Hampshire Street, Cambridge

This year's honorees:

Margaret O'Malley, RN

Alan Sager, PhD

Deborah Socolar, MPH

Hors d'oeuvres and cash bar. For more information and reservations call MASS-CARE at 617-723-7001 or visit www.masscare.org

