

SAM KEPFIELD

Health plan leaves little hope

After four months of delay, the nation finally got a look at President Clinton's health care plan last Wednesday.

Clinton's speech was more a campaign tub-thumper than blueprint. Most of the numbers or specifics Clinton did give, you might as well forget. Congress is going to be writing this one — like the budget — because Clinton simply lacks the leadership to present a plan and make it stick.

Reaction to the speech is sobering. Clinton's approval rating shot up to 56 percent by the weekend. When asked what they liked about the plan, 74 percent of the people said that "everyone will be covered," and 69 percent offered the inane response that "it's better than doing nothing."

Such is the stuff of totalitarianism; people are now willing to fork over their liberty based on fear of being "a pink slip away from being uninsured."

The media-manufactured hysteria began in late 1991 when only 6 percent of the people thought it was an issue. Along came Harris Wofford, winning a Senate seat in Pennsylvania over Bush crony Dick Thornburgh by harping on health care, and the crisis was on.

Throughout this period, and especially in the president's speech and his appearance on "Nightline" the following evening, all we heard were pathetic sob stories. Touching, yes, but hardly a reason to enact the biggest government bureaucracy since the New Deal.

The claim that 37 million Americans don't have insurance has gone unchallenged. But a recent Cato Institute study put the figure at 6 million people who truly want and need insurance but cannot get it. It omits those who voluntarily go without or who are between jobs. No one wants to believe it.

As with the budget, logic and reason seem to have flown out the window. Pushed by the crisis mentality



Such is the stuff of totalitarianism; people are now willing to fork over their liberty based on fear of being "a pink slip away from being uninsured."

that something must be done, what will the nation get?

The government will form a series of regional health care alliances to buy insurance for everyone, and at a lower price since it will have so much clout. Bear in mind that this is the same government that Vice President Al Gore ridiculed for its regulations on ashtrays just the week before, the same government that pays \$600 for EMP-hardened toilet seats.

The \$700 billion spent over the next five years will be paid for in part by cutting \$238 billion from Medicare and Medicaid growth. When has government spending on anything shrunk? Even Pat Moynihan, a rare liberal grounded in reality, called this one a "fantasy."

Abortion aside, the most troubling expenditure in the plan is for mental health services, a sop to Tipper Gore. Drug rehabilitation and counseling for other disorders sounds fine, but watch daytime TV and you realize that everything from youth violence to overeating is blamed on someone else and can be straightened out with just a few therapy sessions. Do you want to pay for some junkie's rehab or for people who blame their entire screwed-up lives on their parents?

But by far the two most frightening words in the whole scheme are "employer mandates." Employers would be forced to pay 80 percent of employee premiums. Even though small businesses would get a partial subsidy of 3.5 percent to 7.9 percent coming out of the tax increase in the '94

budget, more than a few will be forced to lay off workers. Even the subsidies will be phased out.

The sad part of this mess is that, once again, the American people have been trained like rats to pull the federal lever whenever they face the slightest difficulty. Even the GOP has bought into the crisis mentality, though to a lesser extent, for fear that opposition to health care will make them public enemies, obstructionists with their hands clamped firmly down on the lid of the cookie jar that is the federal budget.

It's not a done deal, though. Clinton still has the 1995 fiscal-year budget and the North American Free Trade Agreement to pass, two potentially costly fights. By the time the health plan is ready for a vote, in July or August, two things will happen. First, the recessionary effects of the '94 budget will be in full force. Second, with this in mind, few Congressmen will vote for another spending plan just before an election. It may get postponed until 1995, and a drastically altered Congress could be in place.

We've been here before. Recall the Catastrophic Insurance Act of 1988, which passed with much enthusiasm in a similar crisis atmosphere. The people it benefited, the elderly, found out it cost too much and cut their services. It was repealed less than a year later.

It's not too late to hope.

Kepfield is a graduate student in history and a Daily Nebraskan columnist.

MARK BALDRIDGE

Compromise key to health reform

The United States is on the verge of health care reform: Something everyone wants and no one wants to pay for.

At least if we're going to have to pay for it, we all want a say in how it's going to work, where the money comes from and what gets covered.

The trouble is, if we all get our two cents in, there won't be any system left — or any way to provide it. We can't possibly run our government on consensus; it's just too big and complex for everyone to agree.

Lots of things are like that: issues too big for agreement and seemingly much too important for compromise. But compromise we will. We must to get anything done at all.

So before legislative debate gets too far under way, I think it's crucial to try to take one last look at the problems and decide just which ones we want to solve.

Because that's what compromise will mean — deciding which problems to solve.

Central to the whole debate is the sense many people have that medical care costs too much. The poorest can't afford it at all, and too many others receive inadequate care.

From that assumption I am still at something of a loss to discover where the insurance industry enters into it.

If we could lower medical costs in a more direct way, we would eliminate the red-tape factory that is the modern insurance industry.

And talk about your evil empires — graft, shady business practices and dishonesty are endemic to the industry that subsidizes other people's misfortunes at an enormous profit.

It seems much more rational to attempt a reduction of the cost of medical care directly, cutting out the corporate middle man.

But there are powerful adversaries of this idea.

Perhaps the real enemy is not the government or big business, but the



Perhaps the real enemy is not the government or big business, but the American Medical Association. The AMA has lobbied powerfully in this country in order to maintain its corrupt monopoly.

American Medical Association. The AMA has lobbied powerfully in this country in order to maintain its corrupt monopoly.

Far short of socializing medicine — a course that, for some reason, appears out of the question — there are several alternatives that could still be considered along with the presidential package.

We could:

- De-prescriptionize a large number of drugs.

There is no reason in my mind why an adult who can read a label should be forced to get a prescription for high doses of ibuprofen or lindane, a lice-killing shampoo. But they are.

I myself remember when you couldn't get Actifed without a prescription and the excitement that came with its "liberation."

Suddenly, people like myself who had suffered with allergies for years were relieved of the extra burden of having to pay doctors to tell them to get the drug they knew they wanted.

Many, many drugs could be freed in this way, and medical costs would plummet.

- Grant larger powers to the "nurse/practitioner."

Many drugs that really should be offered only under prescription could be prescribed by trained and experienced nurses.

These men and women are highly trained and many have years of experience, but not one can currently get you a prescription for penicillin with-

out a doctor lurking somewhere in the works.

This, plainly, is ridiculous.

- Grant larger powers to pharmacists.

People already trust the experience and knowledge of local pharmacists to help them make choices and direct them to appropriate drugs. Though pharmacists might not prescribe drugs, they would be more in demand in helping customers obtain newly de-prescriptionized drugs.

- Decriminalize non-traditional forms of treatment.

Why on earth should homeopathy be illegal in Nebraska?

Yet it is. If I give you ginseng for your menstrual cramps or something, I can be busted for practicing a non-licensed form of medicine.

Any of these measures would serve to free up the individual's medical-care options.

They would break the M.D.'s' throttlehold on medical care without altering the quality of that care. Doctors are not infallible, and one needn't be a doctor to know what's what.

And costs would fall as medical-care options proliferated.

But immense forces in the AMA are marshaled against such common-sense ideas.

And to the extent that the AMA wins, the poor and uninsured must lose.

Baldridge is a senior English major and a Daily Nebraskan columnist.

ALTERNATIVE TAN
 It's back! **1 Month Special \$28**
 You loved it, so we brought it back!
 Centro Plaza 48th & R 466-1201

UNL GO BIG RED!
 NEBRASKA VOLLEYBALL
 Cheer on the UNL Volleyball Team in its first Big Eight match of the season as the Huskers take on the Kansas State Wildcats.
WEDNESDAY
 Sept. 29
 7:30 p.m.
 Nebraska Coliseum
Admission
 \$6 - reserved seating
 \$4 - adults general admission
 \$2 - non-UNL students general admission
 Free - full time UNL students with photo I.D.
 For ticket information call 472-3111
U-STOP Home of the *Just Huskers Club*

Evidence of the Blues at Twisters
 Discover all blues CD's on Evidence Records on sale
 All Evidence blues CD's just
\$8.97
 Featuring:
 LUCKY PETERSON
 OTIS RUSH LIVE IN EUROPE
 JUNIOR WELLS PLEADING THE BLUES
 Sampler
 Plus selected titles from the following blues artists on sale:
 Luther Allison, Buster Benton, Lonnie Brooks, Clarence Brown, Eddie Burns, Eddie Campbell, Eddy Clearwater, Larry Davis, Jimmy Dawkins, John Lee Hooker, Johnnie Johnson, Luther Johnson, Louis Jordan, Eddie Kirkland, Little Milton, Robert Lockwood, Magic Slim, Pinetop Perkins, Fenton Robinson, Jimmy Rogers, Otis Rush, Lucky Peterson, Eddie Shaw, Carrie Smith, Koko Taylor, Melvin Taylor, Big Joe Turner, Junior Wells, Mighty Joe Young
Twisters MUSIC GIFTS
 Prices effective through 10-5-93