

Dear Editor:

Though the U.S. is the undisputed leader in emergency health care (our technology rocks) amongst the top 10 industrialized nations, we finish last in almost every other way of measuring health care.

The bulk of the reasons for this can be attributed to our higher percentage of population living under the poverty level (12.5 percent) and therefore, a higher number of persons that do not have any form of health insurance (46 million—and growing 14,000 persons a day).

From 2000-2004 profits for the top 17 insurance providers rose 114 percent. Comparatively, the S&P500 only rose five percent.

At the same time, uninsured individuals grew by six million and health insurance premiums rose 60 percent. This seems to suggest that health insurance companies have incentive to price people out of health care in order to maximize profits.

They do this in a myriad of ways including denying coverage when there are pre-existing conditions, and cherry picking (selectively choosing healthy customers or raising rates on less than perfectly healthy customers).

The end result will be 23,000 deaths attributed to a lack of health care this year. One wonders how companies can get away with treating human beings this way.

So far in 2009 (as of June 30) the health care industry has donated \$11.4 million in campaign contributions. One now knows.

It appears that most Americans agree that it is right to put a stop to cherry picking and denying

insurance because of pre-existing conditions.

They also agree that having the ability to carry a policy from employer to employer should be mandated. Were these issues written as separate individual legislative bills, they would easily pass with little argument. The real debate starts with how to insure the uninsured.

Canada (among others) has a type of single pay system such as we are considering. The pros and cons of such a system are pretty plain. The largest argument for a single pay system is that it seems to work.

A 2003 Gallup Poll shows that while 44 percent of Americans were dissatisfied with their health care, only 17 percent of Canadians were. Another poll showed only two percent of Canadians thought the U.S. health care system to be superior to their own.

It is significant to remember that all Canadians have health care coverage now.

However, on the darker side, the effectiveness, the efficiency, and the cost of this type of system are largely based on how well it is administered.

If we allow our representatives to play pork barrel games and monetary hide and seek inside this type of health care system, it could lose a great deal of its beneficial advantages.

Yet, even in as much as it could be rendered inefficient and more costly, it could probably never be as cold, as callous, or as brutally calculated as our present free-market system.

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