LaRouche: Conyers' Health-Care Bill Is a 'Litmus Test' for Congress

by Marcia Merry Baker

Bill H.R. 676, "U.S. National Health Insurance Act of 2005," introduced by Rep. John Conyers, Jr. (D-Mich.) et al., in the first session of the current 109th Congress (Feb. 8, 2005), remains on target as the way to deal with the current health-care crisis in the United States; namely, to put into place coverage and facilities to be sure that all citizens have needed medical treatment and care. At present, between 45 and 75 million Americans have no health insurance whatsoever, another 50 million have very limited insurance, and the so-called "charity" safety-net of clinics, emergency rooms, community health centers, and hospitals is falling apart. The U.S. health-care system itself has broken down, at the same time that the economy at large is collapsing, under decades of "post-industrial," HMO-era looting policies.

Lyndon LaRouche, who has warned of this collapse process over the past three decades, announced his backing for the Conyers initiative on April 10, saying: "We demand that all members of Congress support getting rid of the HMO system, and support the Conyers bill for universal health care, or else be prepared to be kicked out of office. Every single member of Congress must be put on the line. *This is a litmus test to check the morality of your Congressman or Congresswoman*. Go on the warpath on this one: Those who don't support the Conyers reform of health care, must be punished by being defeated."

In effect, the Conyers bill would *eliminate* the HMO profiteering system, creating a "not-for-profit" system that would provide health care and prescription drugs for all. The focus of the Conyers plan uniquely acknowledges that the current U.S. health-care system itself is broken, which stands in contrast to other legislative initiatives trying to work within the dysfunctional system, to bring care or coverage to subgroups.

Another name for the Conyers bill is "Medicare for All," and Conyers was in office in 1965, when Medicare and Medicaid were first created by Congress, for the purpose of ensuring care to all the nation's elderly and poor. At that time, many of the bipartisan backers of those new programs supported the post-World War II concept, that health care is a human right.

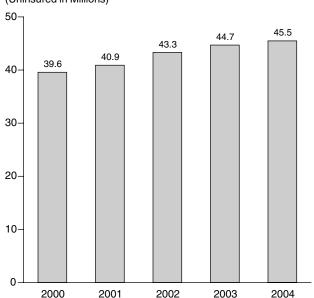
Commitment to the principle of universal health care has been a hallmark of Conyers' 42 years in office, and he has introduced such legislation before. Co-sponsors of the current H.R. 676 bill include Representatives Dr. Donna Christensen

(D-Virgin Islands), Dennis Kucinich (D-Ohio), and Jim Mc-Dermott (D-Wash.). Soon after the bill's introduction a year ago, it had 47 other co-sponsors.

There is no pro forma aspect to this initiative. In brief, as Conyers puts it, the bill's program would be "publicly financed with privately delivered" care. "The goal of the legislation is to ensure that all Americans, guaranteed by law, will have access to the highest quality and cost effective healthcare services regardless of one's employment, income, or health-care status." No co-pays or deductibles would be permissible, and no private health insurers would be permitted to sell coverage that duplicates the public system.

Number of Nonelderly Uninsured Americans, 2000-04

(Uninsured in Millions)



Source: Kaiser Commission on Medicaid and the Uninsured; Holahan and Cook, "Changes in Economic Conditions and Health Insurance Coverage, 2000-2004," *Health Affairs* Web Exclusive, Nov. 1, 2005.

Nearly six million more Americans under age 65 lacked any health insurance as of 2004, compared with 2000, as the total number of non-elderly uninsured rose from 39.6 to 45.5 million over this time period. Today the total number is far worse, primarily due to the sharp decline in employer-sponsored insurance.

20 Economics EIR April 28, 2006



The HMO for-profit system introduced in the last 30 years has downgraded U.S. health care, from the number of beds available and staff-to-patient ratios, to the unaffordable costs of medical care and insurance. Here, a "birthing inn" at a community hospital.

LaRouche has repeatedly stressed the responsibility of the Federal government for the general welfare of its people, to see that needed ratios of the physical health-care delivery system—such as hospital beds, medical personnel, public health services, and so on—be available and accessible (through both community and private endeavors), as shown by the 1946 Hill-Burton Law ("Hospital Survey and Construction Act").

The "Hill-Burton principle" in U.S. health care prevailed up through the 1960s, in particular, with the enactment of Medicare and Medicaid in 1965. Tuberculosis, polio, and other infectious diseases were rolled back; the ratio of hospital beds per thousand residents across all 3,000 counties approached modern standards (then, about 4.5 per 1,000), and other advances ensued. The health insurance system, with all its flaws, still "worked," through its constituent parts, including employer-provided non-profit companies—such as Blue Cross/Blue Shield—and civic charities.

Then, in 1973, with the passage of the pilot project "Health Maintenance Organization Act," the shift against the Hill-Burton/general welfare principle began. Both physical health-care logistics and decent insurance coverage declined drastically. Under nominalist rhetoric about "competition will lower costs," the HMOs and for-profit hospital chains were permitted to carry out looting raids against citizens and medical facilities alike. Physical infrastructure contracted. In Conyers' own state of Michigan, the ratio of hospital beds per thousand residents has dropped drastically from 4.3 in 1980 down to 2.6 by 2000, and is even lower in many localities. To top it off, the Bush/Cheney Administration is now not making required payments to states and hospitals for Medicaid/Medicare expenses, guaranteeing both instant financial crisis, and patient suffering.

Running interference for all this, is former Congressman Newt Gingrich, given the limelight by networks of financial interests, to call for even more HMO "competition" and consumer choice. Speaking at Harvard University on March 30, Gingrich said, "What we need is a Travelocity for health care." Gingrich's entertainment act specializes in euphemisms for how millions of Americans should get no care at all.

As LaRouche said, now is the time for the moral line to be drawn. We are in a three-month period, between now and the end of June, which will be fatal to the bankrupt world financial system. All the various financial schemes, ruses, and waves of leveraged speculation over the decades of the Alan Greenspan Great Game are blowing apart. The system is finished.

Therefore, look around, and you see not only your physical conditions of life going—your house, your hospital, your gasoline, but your ideological way of life. There is no alternative to the changes that have to be made, the changes that LaRouche has been laying out for decades.

LaRouche's advice: Are you afraid of being left with no health care, and no housing either? Go after your Congressman, and get him or her to support the Conyers bill.

LaRouche Endorsement: Support Conyers' Health-Care Reform!

The actual or virtual obliteration of pre-existing, private pension and related 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.

The extraction of financier profits in layer upon layer of the private health-care and pension systems, and the degree of reckless mismanagement shown by the successive waves of actual, and virtual bankruptcy, and mismanagement of more and more of the privately constructed programs, should be taken as a lesson which, in the light of recent experience, no prudent heads of family households could conceivably overlook.

The most essential, mandatory quality of any pension or health-care system, is that the protection it promises must be delivered in a full and promptly timely way when the time for the redemption of that promise has arrived.—*Lyndon H. LaRouche, Jr.*, April 21, 2006

EIR April 28, 2006 Economics 21