

Op-Ed piece on Mandated Health Benefits

by Congressman Henry A. Waxman

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The American health care system is in serious trouble.

We've always prided ourselves that it was the best in the world, and for some, that's still true. But it's not true for the 37 million people without health insurance. It's not true for babies born with retardation or birth defects because their mothers didn't get prenatal care. It's not true for working people who get their insurance rates quadrupled or their policy cancelled when they face a serious illness.

A recent Harris poll showed 89 percent of Americans thought their health care system needed fundamental change. Perhaps surprisingly to many Americans, people in Canada and Britain were much more satisfied with their systems.

We clearly are at a crossroads in this country. If we do nothing, and pretend our current system doesn't need fixing, the number of people without health insurance will continue to grow. We've added 8 million people -- many of them children -- to the rolls of the uninsured over the last 8 years. We've seen more and

more businesses failing to provide health insurance to their employees; almost two-thirds of the uninsured are working people and their families. So our traditional way of providing health coverage is eroding. It's only going to get worse when we try to deal with expensive illnesses like AIDS. And unless we shore up our private employment-based health insurance system, the inadequacies of our underfunded public programs will be even more glaring.

So what's the answer? Should we junk the whole system and move to a public national health insurance system? With today's federal budget picture, I don't see the political will or the practical way to bring about national health insurance now. It would be a mistake to throw out the parts of the employment-based system that work without trying to fix what doesn't first. It's a great strength of the American system that we have pluralistic private approaches and roles for both the public and private sector. We can make it work if we reform it in some very practical ways.

For this reason I have introduced H.R. 1845 -- the "Basic Health Benefits for All Americans Act." All employers will have to provide a minimum benefit package, with employees paying a share of the costs, depending on their income. An expanded and improved public program will cover the poor who are not working.

And insurance companies will be required to sell good coverage at a fair price. The advantages? A level playing field for all businesses, contributions by business and government -- both Federal and State -- and a guarantee of adequate coverage. This plan is realistic, it would accomplish a great deal, and it can be enacted into law now.

Some say major changes are not really needed. But tell that to the woman who has to face a life-threatening illness without health insurance even though she works. Or to the family whose child with cancer is first refused a bone marrow transplant and then cut out of their insurance policy altogether, with thousands of dollars in medical bills unpaid.

When will it be time for them to have equal and affordable access to the health care system? I say the time is now.