

THE PUBLIC, HEALTH, NURSING, AND UNIVERSAL HEALTH CARE



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Public Health Nursing in the Forefront

- Crucial population health services
- Frontlines of community care, prevention
- Organized!



Globalization and the Public Sector

- Global economic agenda
- International trade and services
- Public health
- Universal health care



Global Corporate Agenda: Attack on the Public Sector

- Cut taxes on corporations and the rich
- Cut services
- Privatize
- Deregulate
- Free trade agreements
- Weaken unions and workers' right to organize and have a voice in the political process

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U.S.: Federal Tax Cuts

Decimate Surplus



- January 2001: Congressional Budget Office (CBO) projected federal budget surpluses:
 - \$97 billion in 2001,
 - \$104 billion in 2002
 - \$2.7 trillion over ten years.
- **Tax cuts cost more than \$1.6 trillion over 10 years, + recession**
- July 30, 2001, Treasury announced that it would borrow \$51 billion during the quarter
- 2002: CBO projects a \$1.1 trillion deficit through 2010



Shifting Tax Burden From Corporations to Working Families

- In **1957**, corporate income taxes provided **27** cents of every federal revenue dollar.
- **1977**, corporate income taxes provided **15** cents of every federal revenue dollar.
- In **1997**, corporate income taxes provided less than **12** cents of every federal revenue dollar.



Reduced Government Investment

The federal government spent about \$63 billion less on investment in 1997 than it did during an average year in the '70s:

- *Physical capital (highways, buildings, etc.)*
- *Research and development (a long-term investment in high-wage jobs)*
- *Education and training*

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The Costs of Deregulation

1997

- Telephone Communications
 - Employment down by 144,000 jobs (19%)
- Savings & Loans
 - Employment down by 211,000 jobs (46%)
- Trucking
 - Inflation-adjusted wages down by \$3.52 per hour (28%)

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Services: Next Business Frontier

- Shift services from public sector to private sector
 - Users of services = Consumers
 - User Fees
 - Better shoppers for health care
 - Better shoppers for water
- Decimate public regulation and accountability



Why Services

- Finances
- Telecommunications
- Insurance



Trade Negotiations

- World Trade Organization: agreements set terms (NAFTA, FTAA, GATS)
- World Bank and International Monetary Fund: loans to “developing” nations
 - Interest on the loans lead to debt
 - Austerity in social programs
 - Results: greater poverty



General Agreement on Trade in Services (GATS)

- Facilitate private foreign corporations trading in the U.S. in:
 - Hospitals, equipment and supplies
 - Nurse registries
 - Insurance
 - Pharmaceuticals
 - Water and sanitation



Governments Lose Ability to Protect Services and Users

Article 1110 of NAFTA: a government may expropriate property if it is done a) for a public purpose; b) on a non-discriminatory basis; c) in accordance with due processes

BUT:

It still needs to pay compensation.



How Much Compensation?

- Methanex case: a Canadian firm brought a nearly \$1,000,000,000 claim based on the State of California's decision to ban the sale of MTBE, a suspected carcinogen, in order to protect the State's drinking water supplies;
- Metalclad case: a U.S. firm recovered \$16,000,000 under NAFTA, based on the refusal of a Mexican municipality to grant a permit for the construction of a hazardous waste treatment facility in the community.



Public Safety For Sale

- In the SD Meyers case, a U.S. firm brought a successful NAFTA challenge to a Canadian government ban on the export of PCB wastes.
- Recently, the U.S. Crompton corporation has threatened a NAFTA suit over Canadian restrictions on a dangerous pesticide called lindane, which is a possible human carcinogen banned in Europe for agricultural use, and in California for use in anti-lice shampoo



European GATS Priorities: Water, Postal Service

- US and CA could be sued in World Trade Tribunals for:
 - Setting trade restrictions on services
 - Giving preferences to public services (DSH, immunization programs, Medicare AHC payments)
- “Fast Track” Bill HR3005 strips Congressional oversight of Administration trade negotiations



Vital Human Services for Sale

“Some kinds of public policy choices should be decided by democratically elected governments, not by unelected trade bureaucrats.”

U.S. Senator Jon Corzine (D-NJ)



Market Failure in Water: South Africa

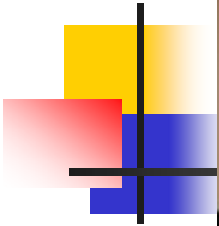
- World Bank proposal to charge “user fees” for water
- Water cut off for inability to pay \$6 connection fee
- 80,000 infected with cholera in eight months
- 180 dead

Patrick Bond



Water: Ghana

- Average income \$1 a day
- World Bank: privatize urban water system as condition of providing loans
 - User fees
 - Guaranteed rate increases for foreign private transnational coporation



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Market Failure in Health Care

- Rising costs
- Rising uninsured
- Falling quality
- Nursing shortage
- Population health
- Emphasis on acute vs. prevention



SHIFTING COSTS

- INDIVIDUAL CONSUMERS CANNOT REDUCE HEALTH CARE COSTS THROUGH INDIVIDUAL “PURCHASING” DECISIONS.
- “USER FEES” AND “CHOICE” PLANS SHIFT HEALTH INSURANCE COSTS FROM EMPLOYERS TO INDIVIDUALS



Uninsured: Dying from a Toothache in the U.S.

A man in his early 20s with a worsening dental infection was unable to afford a dentist. He finally saw a physician who prescribed an antibiotic, but the patient was unable to pay for the prescription. He came to our clinic when the infection had spread to his chest. He died soon after admission. The egregious is commonplace in our non-system.

JAMA Vol. 286 No. 20, November 28, 2001 "Within the System of No-System," Robert L. Ferrer, MD, MPH



Disparities in Insurance

- 56% of Latino noncitizen children
- 23% of African Americans, age 0-64
- 21% of Asians, age 0-64
- 14% of non-Latino whites, age 0-64

(source: Current Population Survey 1998, per Brown 8/00; and KFF 4/00)

Disparities in Outcomes



- Infant mortality per 1,000
 - 6.0 White
 - 14.1 Black
- Maternal mortality per 100,000
 - 5.1 White
 - 17.1 Black

(sources: NVSS, CDC, 10/5/99; Healthy People 2010)



Access and Quality: Preventable Hospitalizations Increasing In CA

- Shortages and maldistribution of primary care MDs, nurses, dentists
- Over 400,000 preventable hospitalizations for Ambulatory Care Sensitive conditions annually
 - Immunizations, diabetes, hypertension
- \$5.7 billion a year in preventable charges



Patient Safety: Everyone At Risk

Underuse, Overuse and Misuse

98,000 people die annually
from avoidable errors in the
hospital.



Who You Gonna Call?

Enron?



California Health Care Options Project

- Federal funding to study expanding coverage (HRSA)
- CA Health and Human Services Agency: contracts to 9 proposals
 - 6 Incremental
 - 3 Single Payer

www.healthcareoptions.ca.gov



Single Payer

- Government collects all funds for health care
- Eliminates 30% spent on administrative waste, profits
- Basis for universal coverage in every industrialized country
- Health Care is a Social Responsibility



California Health Service Plan (HR 3080): Reforming Delivery System + Financing Improves Quality, Access + Savings

- Now:
- Private
- Random
- Inequitable
- Hierarchical
- Unpopular
 - Clinicians leaving
 - Access and Quality:
Preventable Hospitalizations
Increasing In CA
 - Frequent users
dissatisfied

NEW:

- Publicly accountable
- Organized
- Fair & Rational
- Teamwork
- High Quality
- Responsive



Operating Principles

- Government role:
 - Set goals for quality and costs
 - Organize the system
 - Hold system accountable
- Control costs on the supply side:
 - Use budgets, not co-pays
 - Increase primary care
- Engage population:
 - Elected patient boards participate in decisions



Public Owns An Organized, Accountable Delivery System

- Public owns health facilities
 - Pays for health care workers' training
- Allocates services based on population need
 - Strengthens "safety net" providers
 - Strategic planning using population health data
- Public Health Dept. charged to improve population health
- Dynamic. Responsive, Flexible



Reimbursement Goals: Ethical Professionalism, Appropriate Utilization, Cost Control

- Clinicians paid by salary
- Health facilities paid by budget, reflecting case mix
- Can be modified by State HHS to achieve cost and quality objectives
 - Financial and organizational incentives tied to performance



California Health Service Plan (CHSP)

Saves \$7.6 Billion A Year

And Covers Everyone



CHSP Savings

- Average household saves \$813 /yr
 - Some save over \$1,500/year
 - Highest income group pays only 1.5% extra - or less
- Most employers save \$20/worker
- Total system savings over 10 years: \$45 billion



Universal Health Service: Politics

- End government-bashing
- Get the government off our backs and on our side!
- Public Health practices and principles are models for the entire system



Opponents of Reform Recognize The Crisis

- Rep. Bill Thomas (R-CA), Health Chair, Committee on Ways & Means:
Employment-based system of insurance
“fatally flawed”
- Paul Ellwood, architect of managed competition:
“Uneven care in the U.S. is a national disgrace. Ultimately, this thing is going to require government intervention.”



Public Believes Federal Government Responsible for Assuring Minorities Equal with Whites in Health Care

	Health	Incomes
Whites	61%	34%
Blacks	88%	69%
Latinos	85%	60%
Asians	79%	41%

(source: WA Post/KFF/Harvard survey 10/95)



What Can We Do?

- Build support and co-sponsors for universal single payer health care reform in Congress and the California Legislature
- Frame the debate: Issue statements and resolutions that a publicly financed and organized universal health service is the most viable route to coverage, quality and equality in health care for all!



Save Global Health

- Stop HR 3005: Fast Track on GATS
- Subscribe to the Globalization and Health Listserve:

<<mailto:globalizationandhealth-subscribe@topica.com>>



Declare Health Care and Water:

Vital Human Services
Human Rights