

COMMENTARY

Rod Watson: Putting a face on need for public option

Rod Watson, Updated: November 12, 2009

Forget Connecticut Sen. Joe Lieberman. Forget the tea parties. Forget “socialized medicine.”

Think instead of Michael Zak, 25, a college student and self-employed construction worker from Cheektowaga.

After getting a viral infection and spending five days in the hospital recently, the Erie Community College humanities student finds himself nearly \$16,000 in debt after learning that his health insurance was canceled—but finding out only after he became ill.

He went for a Medicaid interview Tuesday but found out he doesn’t qualify. He’ll research other public programs —options, if you will—and keep his fingers crossed. “I’m basically just going to go into massive debt for a while,” Zak said. “I don’t know how I’m going to pay all of this off. I’m just taking it day by day and hoping that I don’t get sick again.”

This is the health care system we have, the one that ranked us 37th in the world when the World Health Organization did the first-ever analysis of health systems in 2000. It’s the system that has us 50th in life expectancy and 44th in infant mortality, according to the CIA’s 2009 World Factbook.

It’s the one that spends more—way more—on health care than any other country, an astonishing \$7,290 per person in 2007, while second-place Norway spent just \$4,763, according to the Organization for Economic Cooperation and Development.

And for all of that spending, we have 47 million—including Zak—uninsured, and we do a lousy job of “preventing costly hospital admissions for chronic conditions, such as asthma or complications from diabetes,” the OECD concluded in September.

Who would fight so hard to protect a system like that, one that puts us 37th in the world?

The opponents of a strong public option, that’s who. Sure, we can implement other worthwhile reforms without it. But they won’t be affordable without an option that curbs the profiteers.

“There’s not opposition by voters to a public option; there’s opposition by the health insurance industry to a public option,” said Diana Cihak, health care

organizer for Citizen Action and part of the Western New York Health Care Campaign. “There’s just a lot of greed in the system right now.”

Zak learned that he got bounced from his plan after his Aug. 31-Sept. 4 hospitalization. As is typical in such horror stories, fingers point all directions. His insurer says that his union canceled it in late August and that the insurer notified him in the first week of September—which, coincidentally, would be around the time he really needed insurance. He says he had plenty of money in his union health care account.

The bottom line: Zak now has debt not only because he couldn’t work for several weeks, but from medical bills that keep coming.

There’ll be plenty of stories like his at 10:30 a. m. Saturday when Health Care for America Now and other groups hold a rally in Lafayette Square to support Rep. Brian Higgins, an ardent backer of a strong public option.

Meanwhile, over in the Senate, the funniest part of the debate is Lieberman’s pledge to filibuster any public option “as a matter of conscience.” Obviously, the Democratic VP candidate who four years later backed the GOP ticket, then, as an independent, flipped back to the Democratic caucus to keep his committee chairmanship has no conscience.

But at least he has insurance to treat his schizophrenia.

“They force us to pay for their health insurance. . . . I’m apparently a peasant. I’m not allowed to have that kind of choice,” Zak lamented. He still wonders how he’ll come up with \$16,000.

The bigger wonder is how there could be any debate over the need for an alternative system.

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