

MAJOR HEALTH CARE REFORM PROPOSALS

The health of a nation is only as good as the health of its people. It is no secret that health care funding and delivery in this country is in crisis. The number of uninsured is growing and the cost of health care is rising.

As nurses, we see the ravages of our current system on a daily basis. The country needs a grassroots effort if we are going to create a system in which all

Wisconsin residents can have access to quality, affordable health care.

The Action Plan for Affordable Health Care (SB416/AB834) is a bill that would require our legislators to pass a health care solution by January 1, 2008, which would lower overall health costs by 15% and cover at least 98% of Wisconsin residents.

To illustrate the current options in Wisconsin to

address the health care crisis, NURSINGmatters has created the grid below, with help of representatives from the four plans. While not a total description of the plans, it should give you some food for thought and, we hope, encourage action. Contact information is available for each plan.

1. Name of proposal 2. Organization proposing website and telephone number for details on the plan 3. Bill numbers and lead authors in the Wisconsin legislature.	"Wisc. Health Security Act"	"The Wisconsin Health Plan"	"Wisconsin Health Care Plan" Wisconsin State AFL-CIO	"A Local Solution"
1. Summary of the system	Coalition for Wisconsin Health www.wisconsinhealth.org (608) 663-8322 2005 SB 388/AB 807 Sen. Mark Miller (D-Monona), Rep. Chuck Benedict (D-Beloit)	The Wisconsin Health Project www.wisconsinhealthproject.org (414) 267-6020 2005 Assembly Bill 1140 Reps. Curt Gielow (R-Mequon) & Jon Richards (D-Milwaukee)	www.wi-citizenaction.org /5_1_hc_wihealthcareplan.htm (414) 771-0700 Not introduced in the Legislature through March 2006.	Wisconsin Health Care for All www.wisconsinhealthcareforall.org (608) 274-0611 Individual cities and other municipalities are encouraged to adopt this plan
2. Who is covered?	The plan covers all Wisconsin residents regardless of age, health or employment status including residents currently on Medicare, Badger Care, Senior Care and Medicaid.	The plan covers most Wisconsin residents under age 65 (Badger Care and Medicaid clients are intended to be phased in at a future date). A 6-month waiting period applies to new residents.	The plan covers all employees and their dependents. The unemployed, self-employed and persons retired up to age 65 can purchase the same coverage at cost through a separate large pool.	All city residents who are not already covered by an employer plan or by a government plan, such as Badger Care, Medicare, Medicaid or Senior Care would be required to have this coverage.
3. What does the plan cover?	Below is a sample, not an exhaustive list.			
All necessary medical care	Yes	Yes	Yes	Yes
Preventive care	Yes	Yes	Yes	Yes
Prescription drugs	Yes	Yes	Yes	Yes
Dental care	Yes, comprehensive	Child prevention only	Yes, as medically necessary	Yes
Vision care	Yes, comprehensive	No	Yes, as medically necessary	Yes
Mental Health treatment	Yes, comprehensive	Yes, state mandated	Yes, parity with physical health	Yes, parity with physical health
Alcohol and drug treatment	Yes	Yes	Yes	Yes
Long term care services in the community and institutions	Yes	No	No	No
4. Would the plan cover care for pre-existing conditions?	Yes	Yes	Yes	Yes

5. Would I be able to keep my own doctor?	Yes	Yes, but you may be charged an additional premium if your doctor is in an insurance plan that is not price competitive.	Yes	Yes
6. What would the insurance plan cost me?	All residents would pay a health care tax. No premiums, deductibles or co-payments would be charged. Billing patients for services would not be allowed.	Each employee would pay a portion of their wages estimated to be 2% per year. In addition, patients would pay relatively high deductibles and co-payments when seeking care equal to a net maximum of \$1500 for single adults, \$2000 for married couples and \$2500 for single parents per year. Less for low income persons.	Employees would pay an annual deductible estimated to be \$300 for a single person and \$600 for a family. There would also be co-payments for certain services and prescription drugs. Residents not covered by their employment would pay premiums equivalent to the employer and employee share.	You will pay a premium for a single or family policy and premiums are reduced for low income persons. You may be required to pay a modest annual deductible and a few co-payments like \$35 for the emergency room utilization.
7. What would my employer pay?	Employers would pay a health care tax, designed to raise the same revenue that is now spent by employers on health care, but with the total spread among all employers.	Each employer would pay an estimated amount equal to 3% to 12% of wages depending on the size of the company payroll.	Most Wisconsin employers would pay a monthly per-employee assessment, estimated to be less than \$300 per month (based on 2003 costs). Cost per employee is low because all employers are paying their fair share.	All employers would be charged a fee for health insurance. Employers who already provide insurance would deduct those cost from the fee and likely would pay nothing to the city. The fee would be determined by an actuarial study but would probably range from 4.5% to 12% of total payroll.
8. How would the plan be authorized?	State law	State law	State law	City Ordinance or citizen ballot initiative
9. Who would decide on the coverage?	The proposed legislation specifically requires that all necessary services be covered. State and regional boards of citizens will decide the necessary plan coverage.	A private, non-profit Health Insurance Purchasing Corporation consisting of representatives from business, labor, farm organizations and two gubernatorial appointees would provide overall leadership	A Labor-Management Commission would determine details of the plan and make changes as needed, within basic guidelines established by legislation.	The city would design the specifics of the plan.
10. What if my employer already provides a better policy?	Existing plans would be replaced by the single payer plan. You (or your employer) could purchase extra insurance to cover any services not included in the single payer plan, such as some cosmetic surgery.	Employers can choose to keep the old plan, but they would have a strong economic incentive to adopt the new plan. Your employer can provide additional benefits over and above the basic plan	Employers can choose to keep the old plan, but they would have a strong economic incentive to adopt the new plan. Your employer can provide additional benefits over and above the comprehensive baseline plan.	You would not be affected if you have adequate coverage through your employer but you could join the city plan if the employer plan was too expensive or not comprehensive.

