

Metcalfe supports statewide health insurance

by Vern Metcalfe

for the Tundra Times

There are dates that stand out in one's mind, and I've had more than a few, mainly due to illness — in my own case plus members of my family.

May 10, 1937 — My mother, Margaret (Lynn) Metcalfe died of tuberculosis, something she first contracted during World War I. My father spent the next three year paying off medical and funeral debts (and my mother never spent a day in the hospital, people of that era usually died at home).

Dec. 2, 1982 — I was rushed to the hospital by my youngest son, suffering from, as it turned out, congestive heart failure. Due to the good care of Dr. Henry I. Akiyama plus the staff of the intensive care ward of Bartlett Memorial Hospital in Juneau, I survived. This attack was followed by a three times weekly out-patient treatment for one and one-half years at the Akiyama clinic where I became more than acquainted with a treadmill.

July 8, 1983 — My wife, Patricia McAlister Metcalfe, died from lung cancer after being treated for the last five weeks of her life at Swedish Hospital in Seattle.

As for my own illness, it was covered by the Veteran's Administration. In the case of my wife, the bill at Swedish was over \$62,000. Had it not been for the knowledge of my children that there was a catastrophic illness program in place in Alaska, I would have been faced with bankruptcy for the bill from Swedish and also another from Bartlett Memorial where she had twice been hospitalized for what appeared to be pneumonia.

The reason for the recitation of the above? Well, the catastrophic illness program was not funded for 1986, and something that I had benefitted from to the tune of \$50,000 (the cap at that time) is no longer available to Alaskans facing this fiscal dilemma, one that will strike one out of three American families during the lifetimes of any given generation.

This is a prelude to the plan I've formulated for catastrophic insurance for all Alaskans.

Costly? Frankly, I don't know, but

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it can be determined by an actuarial study and funded, at least in part, by an initial draw from the reserve fund of the Permanent Fund.

After conferring with an official of that fund I've come to the conclusion that if \$50 million was to be funded for re-investment (by the corporation), it would bring in about \$4 million annually to re-fund the existing statute.

Then I've gone one step further to ensure that Alaskans are the only ones to benefit. As you may or may not know, it has been determined by a study that some 15 to 16 percent of those drawing the misnamed "longevity bonus" have resided in our state for five years or less.

To avoid a wholesale invasion by the terminally ill (with relatives living in Alaska), there would be a deduction from your next dividend check if, say, \$10 — providing for another \$5 million for the fund.

For those who place some faith in the program advanced by the Reagan administration, you should be advised that this is only for the elderly.

After going over this with a staff member of Niilo Koponen's House Committee on Health and Social Services, I discovered that prior to placing a \$50,000 cap on the assistance, some 60 percent of the monies went to what is now known as "neo-natal" health problems, meaning "preemies" — children born with various medical difficulties.

Even after the cap was placed on all of this, the figure then was over 30 percent (of funds disbursed) for neo-natal. In speaking of this proposal to countless fellow Juneau-ites, I've discovered some other startling facts and figures. One friend of mind told of a relative who had premature twins — the tab coming to over \$250,000. Who pays? Who knows? For many, if not most, bankruptcy is the only escape hatch.

In my own case, I was not working

during the time of my wife's illness, as I was still recuperating from my own. I sold my home to my oldest daughter and her husband and paid off the balance I owed Swedish, as well as a loan from my bank covering both local funeral and medical expenses.

For those who will say, "Well, gee, I'm covered (state, federal, municipal employees, teachers, union members), and I don't need this..." let me recite a few facts of life. As many have discovered since the oil bust, no one is guaranteed employment. And it will get worse before it gets better, rest assured.

The Legislature should take some action to extend health benefits to employees of the state either being layed off or discharged, say, six months or until they can gain other coverage.

What Alaska really needs, in addition to the catastrophic insurance program, and it will follow as night does day, is a statewide health insurance program. It is a fact that only the United States of all the nations of the free world does not have some form of national health insurance. As noted above, illness is not patented by the elderly and, yes, my proposal would literally cover you from "the womb to the tomb." And the time is now.

The health insurance for all Alaskans will be a natural outgrowth of the catastrophic program when it is adopted. I can't imagine any Health Maintenance Operation not welcoming this proposal with anything but open arms and prayers for its adoption by the Legislature and signing by Gov. Steve Cowper.

It should also be kept in mind that nationally over 35 million Americans have no health insurance. That figure (or percentage) would be higher in Alaska, perhaps, due to the fact that I doubt if over 10 percent of Alaska businesses have 10 or more employees.

And, few if any, of those truly small enterprises can afford coverage. Individual coverage is virtually out of sight for the young. . . And us elderly? Forget it.

Keep in mind, too, the cutbacks in public health services. The Indian Health Service has suffered reduction in funding; the Veteran's Administration has revised the eligibility requirements for those of us presently covered but won't be unless we are unemployed or otherwise unable to pay.

I'm sure that those reading this are also aware of the fact that while other cost-of-living figures leveled out last year, the HMO costs rose by 7.7 percent, seven times the average of other costs in the United States. This program could also be the lifeline needed now by small community hospitals around our state.

Oh, yes, the emphasis placed on the word "insurance." It is insurance — or will be. Some years ago I approached then Lt. Gov. Terry Miller, who was preparing to run for governor, about a statewide health insurance program. Miller was taken with the idea and inquired into the concept. If memory serves, he received something in excess of 50 replies, all interested in administering such a program.

Most certainly it would reduce the per-capita costs the state now pays out for its employees for regular health insurance. Right now, however, I will settle for the catastrophic insurance program outlined above. It is, incidentally, not cast in concrete, and I would only ask that you, as Alaskans, contact your legislators in support of the idea and also with suggestions that will make it all come true.

Incidentally, I ran for the State House in the primary of August 1986, I suggested this idea then and gained near universal support from those who listened and read about my proposal for re-funding the program. Since then, I've found that more and more people are realizing the need.

From little acorns do mighty oaks grow. In short, we have to start somewhere and the time is now. I would only hope you would agree.