

## Health Care I: Access

BARACK OBAMA:

[February 24, 2009] So let there be no doubt: health care reform cannot wait, it must not wait, and it will not wait another year. [applause]

MAN #1:

Well, it's a shoddy system at this point.

WOMAN #1:

I think that the people that need it most don't have access to it.

MAN #2:

I think that the health care system is probably broken.

TEXT:

July 15, 2009

The Senate H.E.L.P Committee passes a bill to reform health care.

SEN. CHRIS DODD, Committee Chair, D-CT:

I move to report the bill as amended.

TEXT:

July 17 & 31, 2009

Three committees in the House pass their health care reform bill – H. R. 3200.

REP. CHARLES RANGEL, D-NY:

The bill has passed, so our members have two days.

MAN #3:

The better you are economically, the better your health care is going to be. I think that's something that should change in America, mostly.

WOMAN #2:

To be honest with you, I don't think that it's really fair.

BARACK OBAMA:

On the Right, there are those who argue that we should end employer-based systems and leave individuals to buy health insurance on their own.

BILL WEISSERT, Professor of Political Science, FSU:

On the extreme Right, they want to say, we want costs to come down, we want quality to go up, but we don't want anybody putting it in the hands of government; keep the government out of my health care. On the extreme Left, we would adopt a single-payer system. We could still have private physicians and private hospitals delivering services, but everything would be paid by the government. [1:28]

BARACK OBAMA:

There are those on the Left who believe that the only way to fix the system is through a single-payer system like Canada's.

BILL WEISSERT:

It's a system that many other countries have, but the United States has a strong tradition of distrust of government. In Canada, they think the government's there to help them. Here, we think the government is there to pick your pocket.

TEXT:

[September 22, 2009] The Senate Finance Committee begins discussing amendments to its health care reform bill.

SEN. MAX BAUCUS, D-MT:

Presidents from Truman to Johnson, from Nixon to Clinton, have had the courage to attempt health care reform. Once again the time has come to make the attempt.

SEN. PAT ROBERTS, R-KS:

Americans are unique, a people and country bred with a strong individual spirit and a distaste for big government. The last thing they want is the federal government sticking its nose into their personal business.

BARACK OBAMA:

We know we must reform this system. The question is how.

BILL WEISSERT:

My name's Bill Weissert, I'm a professor of political science at Florida State University, and I run the Master's in Public Health program for the College of Social Sciences.

[to class] You could be pretty close to middle class, but if you live in Texas or Mississippi, or even Connecticut, which is also a 209(b) state...

The basic problem is that our costs are too high, our quality is too low, and then we also have this nagging problem of in the ballpark of 46 million people who don't have access to care because they don't have insurance.

TEXT:

## US Health Insurance Access

### Types of Coverage

Employer-based – 176.3 million

Individual – 26.8 million

Medicaid – 42.6 million

Medicare – 43 million

Military – 11.5 million

Uninsured – 46.3 million

Who are the uninsured? [3:09]

BILL WEISSERT:

Well, they have some subgroups – the people who are working, and working families, who don't make enough to be able to afford insurance and their employer doesn't offer insurance. They make too much money, because they're working, to qualify for Medicaid, the federal/state program for poor people, but they work in dry cleaners and McDonalds and other places, and they don't get health insurance and they can't afford to buy it.

TEXT:

Uninsured (18 to 64 Years)

Work Status [pie chart]

18% Part-time

28% Did not work

55% Full-time

BILL WEISSERT:

And then you have a few people who are offered insurance by their employer, but there's a co-pay to be made or shared cost of the premium, and they simply feel like they can't afford it. So there are some people who are offered insurance but decline it.

TEXT:

Uninsured

by Income [pie chart]

30% Less than \$25,000

32% \$25,000-\$49,999

17% \$50,000-\$74,999

21% \$75,000+

BILL WEISSERT:

The easiest one to understand is what are called the young invincibles.

BRANDON RAGAN:

It's literally, can Paige get an education, or...

PAIGE RAGAN:

I can go to college, which we're paying for, or I can get health insurance. I'm choosing college for now.

BILL WEISSERT:

And those are people in their 20s who are no longer eligible for their parents' insurance, and they're working in a job that doesn't offer them insurance, and so they figure, I'm in good shape, I don't really need it, I'm not going to get sick, and if I do, I can go to the drugstore and get something. [4:21]

TEXT:

Uninsured

by Age [pie chart]

16% under 18

18% 18-24 years

23% 25-34 years

17% 35-44 years

25% 45-64 years

1% 65+ years

PAIGE RAGAN:

I went to grab it without even thinking. And I grabbed the handle of the pan and burned my...

BRANDON RAGAN:

Ninety-five percent of your hand?

PAIGE RAGAN:

Eighty-five percent of my hand, second-degree burns.

BRANDON RAGAN:

So we ended up going to Centric Care. I mean, it's the typical thing – there's one doctor on duty, there's four nurses, and we sit there and we wait. And Paige has a melting bag of ice on her hand, and we both are talking, and we're saying, as we're filling out the information – it was \$179 just to see the doctor.

PAIGE RAGAN:

I asked the lady that was helping us check in, I said, look, is there any way you can get a doctor or somebody to come look at this beforehand, before we even go in? Because we can't afford to spend this kind of money for you to tell us that it's something we could take care of ourselves. And she kind of made that face, like, we're not really supposed to

do that, and she's like, I'll come – I was crying, and so she's like, all right, I'll be right back. And she went in the back room and the nurse came out with her. And it was actually the nurse that ended up treating me, but she looked at my hand and she said, you have to treat it because it's your hand. She was like, if it was anywhere else, you know – but there's too much risk of infection. And she said, we have to treat it.

BRANDON RAGAN:

I mean, it could've been much worse. It could've been way worse.

PAIGE RAGAN:

But we couldn't have afforded for it to be worse.

BRANDON RAGAN:

No. [5:48]

PAIGE RAGAN:

At all.

BILL WEISSERT:

If they contract an illness or any of those things that involve catastrophic costs are going to very quickly bankrupt them. And they're going to wind up – they're going to go to the ER, they're going to get treated there, because you can get initial treatment in the ER free, it's required. But then they're not going to be able to pay for their treatment, so they're going to go somewhere and become somebody's bad debt. And that bad debt is going to be paid by the rest of us.

TEXT:

Is health care a right?

REP. BERNIE SANDERS, I-VT:

Should every American have health care as a right? Now, that exists in every other industrialized country; obviously it doesn't exist in our country. A hundred years ago, people at the federal and state level said every kid in America should be able to go to school. So every kid in America can go to a public school today regardless of the family is rich and poor; no one debates that. Education is a right. When you dial 911, the police department comes to your door whether you're rich or you're poor. I have not heard anyone suggest, well, you know, you're not paying enough in taxes, police shouldn't come, fire departments shouldn't come when your house is burning. But somehow in health care, if a low-income worker gets very, very sick, well, you're on your own. You're on your own. Uniquely in the industrialized world, that person is not guaranteed health care. So that's an issue we have got to deal with. And I think I am on the side of the vast majority of the American people who say something is wrong, health care should be a right of all people.

MAN #1:

A right? In a perfect world, yeah.

MAN #4:

I don't know, I feel like if it was considered a right, there's a chance it would be abused.

MAN #5:

No, but I think it's a necessity. I don't think it's necessarily a right, but what good does it do society in the whole to have people get sick?

WOMAN #3:

I do think it's a right. I think that – I think everybody should have the ability to be healthy, and sometimes we need health care to be able to do that.

MAN #2:

I don't think it's a right. I think in a perfect world it would be. But it's something that everybody should have. [9:10]

MAN #6:

I see the right to health care more as a, the government is going to watch your health. I feel that that's very much an infringement upon autonomy.

DR. GEORGE RETSCH-BOGART, Pediatric Pulmonologist:

So right now, I notice you have a little bit of cough while you're doing your pictures. Do you think your cough is better?

GIRL:

Yes.

GEORGE RETSCH-BOGART:

I firmly believe that health care is a right, that this is something that is so fundamental to the well-being of anybody that lives in this country, or in the world, that you just have to provide it. I mean, it is just unethical for me to imagine that you would set a priority that somebody could have this and somebody else could not. And so that's why I think we have to go back to putting the patient first and starting to build from there, and getting models where that continues to be the way we sort of ask the questions, whether it's about care or the structure of organizations or the way we design clinical trials, and set all the kinds of priorities.

MATTHEW RIDENHOUR, Republican Candidate, Charlotte City Council:

Rights come from the people. Rights are inherent to just being born and being alive. They should be found in any people across the world. Responsibilities of government are

different, and those come from the top down. And I don't think that universal health care, or health care in general, is a right. I think it's something that maybe is a privilege, but it's certainly not a right.

They say, well, what's wrong with the government taking over the auto industry, or what's wrong with the government telling us how to run the health care industry? Well, there's only so much control to go around. So the more you give the government, the more you're giving up on a personal level. Should you have 100 percent? No, we do need to have a balance between government control and personal liberties. The question is, where do you find that balance? And we believe the balance should err on the side of personal liberty rather than government control.

BILL WEISSERT:

Health care is not a right. It's not in the Constitution, it's not in most laws – with a couple of exceptions, EMTALA. It is a right by statute under Medicare; if you're 65 or you're permanently and totally disabled, and you're certified to be that by the federal government, then it's a right for you, an entitlement. And for the poor population, if they meet a lot of conditions and have the right medical need, they have a right to care under the Medicaid program. But for the average American, no, you don't have a right to care. [10:32] It may be that a just society would give you that right, but our society has chosen not to. In this country, health care is a commodity. It's a commodity just like potatoes or automobiles or plush carpeting.

REPORTER:

The Democrats are saying there has to be a public option, right?

REP. RON PAUL, R-TX:

Well, of course, because they base it on a false assumption of an understanding of human rights and personal liberty; they say you have a right to it. Well, I don't have a right to medical care, I don't have a right to a job, I don't have a right to an automobile, I don't have a right to a house. I have a right to my life and my liberty and to keep the fruits of my labor. That's where you get production, and that's where you have the best distribution and the wealthiest situation in the world – the market. But we've given up on that, we don't have much faith in it, and this administration has said, no, all we need to do is spend, borrow, print, and just pass out the goodies, and everybody's going to love us.

PAIGE RAGAN:

We supposedly live in one of the wealthiest nations in the world, and yet we can't provide care to all of our citizens. I think you can't say that it's something that people aren't – that it's not worth having for every citizen. I think it's too important. It's not something people can choose; they have to have it.

BRANDON RAGAN:

I don't know. I don't know if it's a right. I think it's a privilege. But then I'm screwing myself over as I say that. [laughter] It's a privilege that shouldn't cost as much as it does.

[credits]

BRANDON RAGAN:

What was the first thing you grabbed?

PAIGE RAGAN:

Well, the vodka bottle. [laughter] But it was cold! It was in the freezer; it was cold.

BRANDON RAGAN:

It's something I've definitely struggled with, especially with the burn, as I refer to it. Because when it was bandaged up it was just the fingers; I called it the claw. I'm not very sensitive.

It would be nice to be able to have affordable health insurance...

PAIGE RAGAN:

Forgot to turn it off. Okay...

BRANDON RAGAN:

I mean, they should be able to give Americans affordable health care... [noise – laughter]