

THE REAL MOTHER'S DAY

Mother's Day is a time when all moms should get breakfast in bed and some flowers, right?

But Mother's Day was not meant to be a crassly commercialized, rose-scented tribute to sweet, docile mom. Rather, it began as a bold cry by mothers for all mothers to rise up against war. In the 1860s, thousands of mothers were devastated by the brutal slaughter of the Civil War, and many dared to stand up (at a time when women could not even vote) to decry war in the name of motherhood—and to urge that all mothers become a force for peace.

The original Mother's Day proclamation was penned in 1870 by Julia Ward Howe, the renowned author of "The Battle Hymn of the Republic." Far from the sing-song sweetness of a Hallmark card, this was a stark and ringing call for action: "Arise then, women of this day!" it began. "Our husbands shall not come to us reeking of carnage for caresses and applause. Our sons shall not be taken from us to unlearn all that we have been able to teach them of charity, mercy, and patience."

In the spirit of this proclamation, a nationwide group called CodePink: Women for Peace held a 24-hour vigil in front of the White House on Mother's Day weekend, with concerts, organizing sessions, and readings from hundreds of poignant letters that mothers have written to Laura Bush, urging the First Mother to help stop the war in Iraq.

Over the long haul, CodePink is working for a world without war. To join the effort, go to www.codepink4peace.org.

A GUSHER FROM EXXON MOBIL

Did you make \$144,000 last year?

Only two percent of Americans earn that amount of money for a year's work, but former Exxon Mobil

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The *Hightower* LOWDOWN

■ Edited by Jim Hightower and Phillip Frazer ■ Vol. 8 No. 06 ■ June 2006

Our system, designed by Big Business, is ranked 37th in the world

The four Big Lies about universal health care

How messed up is America's health-care system? Consider the case of the Leavitts. Anne and her husband Dixie, both in their 70s, got frazzled trying to work their way through the maddening maze of George W's new prescription-drug program, which compels seniors to choose among 1,400 competing drug-insurance schemes offered by 80 corporations. Each plan in this baffling "marketplace" offers different coverage, is frustratingly complex, and is filled with fine print. The Leavitts had to call on their son to help them select a company to cover their meds.

But—oops!—even with hands-on help, Anne and Dixie made a bad choice that almost cost them their entire medical coverage. They rushed to drop that plan and were lucky to find

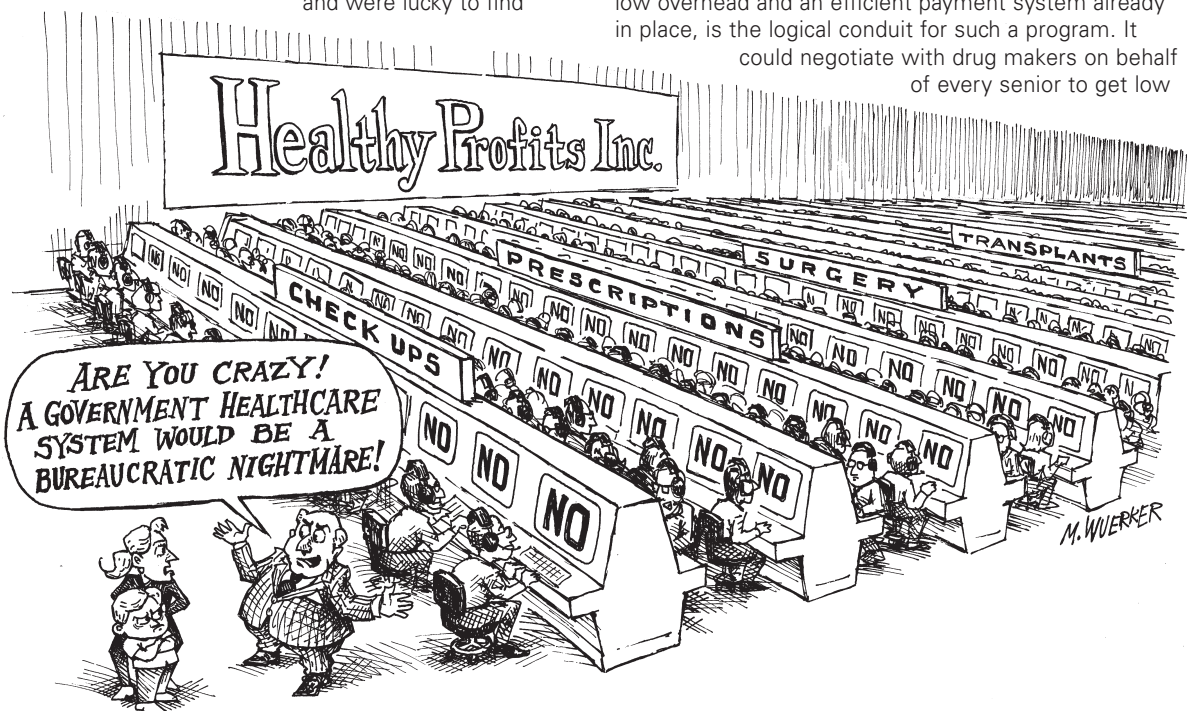
another at the last minute to avert a family disaster.

What makes the Leavitt's story unique among the millions of seniors who've been similarly discombobulated by Bush's convoluted prescription plan (including 15 million who've been left with no drug coverage) is that their helpful son is none other than Mike Leavitt. Yes, the head honcho of Bush's Health and Human Services Department! One more twist: Dixie Leavitt made his fortune in the insurance business.

If someone who's an insurance professional and is personally advised by the government's top health official still gets flummoxed—that's a clue that the Powers That Be have saddled us with a truly lousy program.

The health-industrial complex

There's no legitimate excuse for this mess. A program to provide medicines for every single senior could and should be simpler and far less expensive than Bush's \$1/2 trillion scam. Medicare, with its extremely low overhead and an efficient payment system already in place, is the logical conduit for such a program. It could negotiate with drug makers on behalf of every senior to get low



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CEO Lee Raymond, who retired last December, is among the lucky ones. Oh, mind you, he wasn't paid \$144,000 a year...or even a month...or for a week's worth of work. Lee took \$144,000 in pay *each and every day* he was at the helm, including Saturdays, Sundays, and holidays. His total haul during his 13-year tenure was \$686 million.

And now we learn that Exxon Mobil didn't give Lee a gold watch when he retired. Instead, he got a pension package worth \$400 million. Factor in this wad, and CEO Raymond made *\$229,000 a day*. Assuming he worked eight hours every day, that's \$28,000 an hour!

An official statement said simply that this kingly sum was a fair reward for Lee's "outstanding leadership of the business." Well, yes, Exxon Mobil flourished during the Raymond years, especially at the end of his term—and the executive suite at corporate headquarters was even dubbed "The God Pod." But the company's success was due not to god-like genius by Raymond, but to windfall profits generated by the rise in oil and gasoline prices. Exxon's oil wells pump out more crude every day than Kuwait, and it is the world's largest refiner of gasoline.

"THE K STREET PROJECT"

Back in the 1990s, Newt Gingrich, Tom DeLay, and Republican lobbyist and right-wing anti government guru Grover Norquist invented the "K Street Project" to require corporate lobbying firms (which are mostly headquartered along Washington's K Street) to hire Republicans as their lobbyists and to give most of their campaign donations to the GOP. The unwritten *quid pro quo* of the project was that corporations that played along could expect a friendly reception for their legislative agenda.

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prices on all medicines, then pay pharmacists directly for the total cost of prescriptions they fill. Instead, Bush and Congress put the new drug benefit in the hands of the corporate bureaucracies that separate us patients from our medical professionals. All seniors are on their own to purchase one of the confusing myriad of drug cards from HMOs and insurance companies. These middlemen then bill Medicare for whatever medications the seniors get and put no lid on the prices of the drugs.

Thus, rather than being a straightforward benefit for people in need, Bush's program has become a boondoggle benefit for America's bureaucratic, wasteful, fraud-ridden health-industrial complex. Such giants as UnitedHealth, Humana, and WellPoint (which have already scarfed up more than half of the new drug program's market) are given both a new source of monthly premiums and a generous federal subsidy to provide prescription coverage.

Not to be left out of the financial fun, the drug barons have obtained a green light to bloat their profits (already the highest of any industry) with overpriced pills that ultimately are paid for by Medicare dollars taken out of all of our paychecks. **WARNING: The following fact could make your eyeballs explode:** Bush demanded and got a provision in his new program that specifically prohibits Medicare officials from negotiating with drug corporations to lower the prices they charge.

If only this were a bad horror movie! Alas, it's the core reality of America's sick health-care system.

Wait, you say. *We've got the top technology and medical know-how in the whole freakin' world. America is Number One! We have the healthiest people and we get the best-*

Sick care

Even if you're insured, our corporate-based system really isn't in the business of delivering health care—rather, it's a "sick-care" system. Get sick, and we've got diagnostic tests, the latest technology, and lots of medicines for you. But *preventive* care to keep you from getting sick, or health regimens to manage a chronic disease—sorry, we don't cover those.

Insurance companies refuse to pay \$150 for a diabetic to visit a podiatrist who can help prevent foot ailments caused by diabetes—but they will shell out \$30,000 to cover a foot amputation.

Also, insurance companies—with their eye always on the bottom line—have drastically altered the human touch of family doctors. Changing "patients" into "consumers of health-care resources" reduced human beings to units, and the medical emphasis shifted from care to speed. Hospital patients are now called "throughputs" by insurance beancounters, and a visit to the doctor is termed an "encounter." Each encounter is not supposed to last more than seven minutes.

quality health care there is, bar none. USA! USA! USA!

Well, that's the rah-rah myth we're fed by the industry, the media, and most politicians, but it's not true. Still, if you insist that the USA simply must be Number One, it is true that ours is by far *the most expensive* health-care system on the globe. Go USA! In 2004, spending averaged \$6,280 for each man, woman, and child in America—more than double the average (\$2,307 per capita) spent in all other industrial countries.

Over 16% of our economy (\$1.9 trillion last year) goes into our corporatized system—50% more than Switzerland's universal system, which ranks second in spending per person. Not only does the U.S. drastically outspend everyone else, but it does so while leaving tens of millions of Americans outside the system. In contrast, Canada puts only 10% of its economy into healthcare, Australia 9%, and England 7%, and these countries manage to provide care for every one of their people.

While we Americans pay much

more, we get far less. The World Health Organization's latest survey ranks the quality of U.S. health-care at—cue the trumpets—*37th in the world*. Ta-Da! Not only is our system's performance beneath Canada, Japan, and all of Europe, but it's also beneath such powerhouses as Malta, Colombia, Morocco, Chile, and Dominica. We're only one notch above Slovenia, for godssake!

America's "CorporateCare" system fails on the most basic measures of health. For example, babies born in impoverished Cuba have a better chance of survival than babies born here. On average, 77 babies die every day in the U.S.—an infant mortality rate that, according to the CIA World Factbook, ranks us way down at number 42. At the other end of life's span, our people can expect to die younger than those in 34 other countries—including Cuba, Andorra, Luxembourg, San Marino...and, yes, Slovenia.

Rationing care

Universal health care is not an *economic* issue—our country is the

Do something!

Sick and tired of waiting on Washington to take action, grassroots groups are on the move, demanding a national health-care program to cover all Americans. Here are some of the activist groups that produce excellent materials on the issue, as well as groups that are forging effective citizen coalitions to organize and mobilize the public at the local and state levels:

- **Americans for Healthcare:** www.americansforhealthcare.org, 1-866-HCVOTER
- **Healthcare Now!** www.healthcare-now.org, 1-212-475-8350 They update the progress of H.R.676 "The U.S. Health Insurance Act."
- **Center for American Progress:** This group published a well-documented, 13-page paper by former Sen. Tom Daschle on the U.S. health-care system and the need for universal care. You can download it from www.americanprogress.org.
- **National Coalition on Health Care:** www.nchc.org, 202-638-7151
- **Healthcare For All:** www.hcfa.org, 617-350-7279
- **Physicians for a National Health Program:** www.pnhp.org, 312-782-6006
- **American Medical Students Association:** www.amsa.org, 703-620-6600
- **Families USA:** www.familiesusa.org, 202-628-3030

richest in the history of the world, and we already throw more money into the health-care trough than any other nation in history. Nor is health care even a *health* issue—our doctors, nurses, technicians, nutritionists, pharmacists, and others are phenomenally skilled, having both the intellectual and technical capability to meet the health needs of everyone in our land.

Universal care is a *moral* issue—and that's where our country has gone all slippery. Notice that the CEO class and political elites all are rolling along in the Rolls Royce of health plans, courtesy of generous subsidies from us taxpayers. These are the very people who control policy making in Washington, and they have shown no ethical qualms about taking good care of themselves while watching the majority of their fellow citizens trying to go down life's bumpy health-care road in a sputtering Yugo—or, worse, walking barefoot.

It's well known that our system coldly leaves more than 46 million of us without any health coverage. That's one in every six Americans, including 8.3 million children. If you're keeping political score, the number of uninsured has jumped by six million under the Bushites' five-year reign in Washington. More than half of America's low-wage workers (those paid \$20,000 a year or less by such outfits as Wal-Mart, Tyson, or McDonald's) are not covered—and more than half of them are having problems with their families' medical expenses. Quite a few are paying a heavier price—some 18,000 Americans die unnecessarily each year due to lack of health insurance, roughly the same number who die of stroke, HIV, or homicide.

Less well known, however, is the costly burden on millions more who supposedly are "covered" but may

suddenly find themselves on the hook for thousands of dollars if they get seriously sick. Here's how it can happen:

- **A 20% co-pay** can quickly become a problem for middle-class workers who, for example, need cancer medicines running \$12,000 per month.
- **A trip to the hospital** can leave you with a sickening side-effect: having to pay \$10,000 or more for treatments that were quietly excluded in your policy's fine print.
- **Of the 29 million** Americans now in medical debt, 70% were insured when their medical bills put them in this situation.
- **Medical bills** help drive about a million people into bankruptcy each year - 68% of them had health insurance when they filed.

The fix

The system is so obviously messed up that even the Bushites know that something must be done. Predictably, their "fix" is corporate driven and doomed to be an expensive failure.

Just as he'd like to do with Social Security (*Lowdown*, March and April 2005), George wants to privatize Medicare and Medicaid and also leave all other Americans at the mercy of "marketplace care"—controlled by the usual suspects of the health-industrial complex. His lure is to offer health-savings accounts, "allowing" people to put a few thousand dollars into these tax-free schemes. We are all then to draw from HSAs to cover routine medical expenses and to buy high-deductible insurance policies (there's those middlemen again) for our catastrophic expenses. What if your savings and insurance policies are inadequate? Well, tough luck, sucker.

The insidious ethic behind Bush's fix is that health care is just another

product to be purchased in the "free" marketplace, no different than buying a car or an electronic gadget. The Bushites view health as a consumer good, not as a part of the common good. In this view, people who need care are not "patients," but "customers," and it's up to individuals to become smart shoppers, buying the health care they need.

Excuse me, but while "consumer driven" makes a slick sound bite for George W, purchasing health care is not at all like picking out a new refrigerator. Start with the obvious fact that we're not all doctors or medical technicians. How do we know whether we need this test or that one, whether it's cough syrup we need...or a cancer treatment? If you become seriously ill, are you really in a position to go comparison shopping for the cheapest hospital and specialists? And do you really want the cheapest? Health care is not a market, it's a human need.

Yeah, Yeah, say the Bush ideologues, *but you mooches will overuse the system if it's not your own money you're spending*. First of all, it is our money—either in the form of insurance premiums or taxes. Second, even the best-insured people rarely go get a colonoscopy or amputation just because it's covered. Going to the doctor is hardly something that people do for enjoyment.

A moral choice

Years ago, Martin Luther King, Jr., said, "Of all the forms of inequalities, injustice in health care is the most shocking and inhumane."

Allocating health care according to the size of your bank account or to your privileged position in society is fundamentally (even biblically) immoral. It's also a shameful embar-

Naturally, this quickly devolved into a system of thinly veiled bribery, with lawmakers trading legislative favors for lobbyists' cash. Thus, the term "K Street Project" became a pejorative for big-money corruption in Washington. This so upset Norquist that he's trying to trademark the phrase "K Street Project"—and he says he'll sue the pants off of anyone who uses it as a symbol of unethical behavior.

And you thought that Republicans were opposed to frivolous lawsuits! No, they only oppose *your* lawsuits. As a group, corporate Republicans are the most litigious bunch in America.

Maybe Grover could trademark "Wall Street" while he's at it, or "Madison Avenue." Both have a negative connotation to much of the country, and Norquist could keep a whole circus of lawyers busy suing folks who speak badly of his trademarked streets.

A fun-loving group called The Talent Show has suggested that Grover should use his trademark to market a line of appropriate products bearing the "K Street Project" logo, such as gold money clips and paper shredders—and orange jumpsuits for the well-dressed lobbyist's jail term.

THE GRANNY PEACE BRIGADE

Last fall, 18 ladies ranging from 62 to 91 years old descended on an army recruiting station in Manhattan. They wanted to enlist and be sent to Iraq in the place of young people who otherwise would have to go. "Kill us, not them," was their plea—a grandmotherly gesture to focus public attention on the deadly price of Bush's war of lies.

When told to go away, they simply sat down—for which they were arrested, hand-cuffed, jailed, and charged with "disorderly conduct." The prosecutor offered to dismiss the charges if the grannies agreed not to cause any

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The LOWDOWN

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“trouble” for six months.

No deal, shouted the 18, instead demanding their day in court. As one put it, “We are at a very important point in the history of our country. It is our responsibility as patriots not to be silent.”

In their six-day trial, prosecutors claimed the women had blocked access to the recruiters. But Judy Lear responded that if someone had approached, she would have moved over. “I’m a very polite person,” she noted. Well, sniffed prosecutors, you people weren’t really prepared to go to war, to which Diana Dreyfus retorted, “I was totally prepared. I had just recently gotten divorced. I was ready.”

When the judge finally dismissed all charges, the grannies gathered happily with their lawyer, who told them: “The decision today says the First Amendment protects you to protest peacefully. So go do it.” The grannies cheered.

An old cliché declares that if you’re not a liberal at 20 you have no heart, but if you’re not a conservative at 40 you have no brain. Maybe so, but if you’re not a radical by 60, you’re really not living at all.

WATCH MY LIPS

It seems like yesterday that the entire BushCheney regime was ridiculing the United Nations, declaring that if that body’s security council refused to pass a war resolution against Iraq, the U.S. would attack anyway. They claimed the right to disregard the will of the U.N. whenever they pleased.

But now Iran says it too has the sovereign right to ignore the U.N. and will continue to develop its nuclear capability even if the Security Council formally condemns it. To which Condi Rice said, with a straight face: “The security council is the primary and most important institution of peace and stability and security, and it cannot have its will simply ignored by a member state.”

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rassment for any wealthy nation.

A strong, fair, affordable choice is readily available—and it’s time to fight for it. Americans can keep wasting hundreds of billions of dollars a year on the handful of bureaucratic corporate profiteers that make up the health-industry complex, or we can put that money into a single-payer system that will deliver quality care to everyone.

Despite relentless ideological assaults on the idea of universal, government-financed systems by cult-of-the-market dogmatists and right-wing blowhards, the untold truth is that such systems work. Let’s refute a few of the Big Lies that have kept a national, single-payer health plan from even being considered.

IT’S SOCIALIZED MEDICINE. Wrong, Limbaugh-breath. Like Medicare, government doesn’t *deliver* the health care under a single-payer system (SPS)—you still go to your choice of doctors and hospitals. SPS, as the name suggests, is merely a government-run *payment* system. Instead of you and me paying inflated premiums to profit-seeking insurance giants which then pay our medical bills, SPS eliminates the rip-off overhead of the middleman and pays all of our bills directly to the providers.

PRIVATE IS ALWAYS BETTER THAN PUBLIC. Not at performing truly public functions, such as assuring health care for all. Presently, up to a third of the health premiums we pay to insurance corporations go not to health care but to their profits, marketing campaigns, CEO pay packages, posh headquarters, lobbying firms, and—most damning—massive bureaucracies whose sole purpose is to try to deny coverage for our medical treatments. With SPS, all of these costs are eliminated—Medicare, for exam-

ple, spends only 2% of its revenues on administrative costs.

WE CAN’T AFFORD TO COVER EVERYONE.

We can’t afford NOT to have universal care. When today’s uninsured millions get sick, they end up at the ER—the most expensive care there is. Also, they get no preventative care, which is far cheaper than paying for the serious illnesses that they later develop. A decade ago, Taiwan switched from a U.S.-style corporatized system to a Canadian-style SPS. They quickly went from 60% of their people covered to practically all—with virtually zero increase in overall health spending.

THERE’LL BE WAITING LISTS. Hello! Have you ever tried to get a quick appointment with your family doctor—especially at night or on weekends? Only a third of Americans have same-day access to their own doctor. It takes days, even if you have insurance—ask an uninsured American about waiting lists! And forget about trying to see a specialist within a month of calling. No country with SPS has a waiting list for emergency care and few have them for primary care. Waits for other procedures are almost always for elective surgeries (liposuction, face lifts, tennis elbow, non-essential MRIs, etc.).

Why not now?

The American people overwhelmingly support a major, progressive shift from corporatized “care” to universal care. Recent polls show consistent agreement on the need for real action:

- **Everyone has the right** to quality, affordable care (90%)—Lake Research poll of U.S. Women, 12/05
- **Average Americans** spend too

much on health care (65%); government spends too little (70%)—Pew poll, 3/06.

- **Our current system** has so much wrong with it that either “fundamental changes” are needed (56%) or we must “completely rebuild it” (34%)—CBS/*New York Times* poll, 1/06.
- **Government should guarantee** health coverage for every American “even if it means raising taxes” (65%)—Pew poll, 5/05.

Likewise, 64% of doctors favor a single-payer health plan, according to a 2004 Harvard Medical School Survey of Massachusetts physicians. Even corporate executives—from General Motors to Wal-Mart—are publicly waiting about the high cost and low coverage of America’s current system (though none are providing the leadership to put America on the right track to a national plan of universal coverage).

A single-payer system is the answer. An unusually strong editorial in March by the *St. Louis Post Dispatch* expressed the benefits succinctly: “Employers would no longer be saddled with health care. Workers would no longer worry about health care for themselves or their children. And we could toss the disgraceful private health insurance industry, with its wasteful bureaucracy and inscrutable coverage rules, into the dumpster.”

Many good grassroots groups are pushing this fundamentally moral issue into the elections of ‘06, ‘08 and beyond, confronting Republican lawmakers on their shameful fealty to corporate greed and Democrats on their appalling wimpiness. We can achieve the goal of good-quality health care for all—and advance America toward the greatness of its democratic potential.

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