

INDEPENDENT THINKING

Universal health care: the wrong prescription

By BRIAN SCHWARTZ

What good is having medical insurance if you cannot get medical care? Peddlers of "universal health care" - from Hillary, Obama, to 2nd Congressional democratic candidate Jared Polis - don't get this.

"Universal health care" is false advertising for politically-controlled medicine, with government as the "single-payer" monopolistic insurer. But having coverage does not guarantee getting medical care.

Since patients prepay through taxes, medical care appears "free." Hence, they have strong incentive to over-consume and providers need not compete on price. To contain costs, governments restrict your access to life-saving treatment. In countries with such "universal coverage," patients die waiting for treatment.

The Canadian Medical Association Journal reports that in one year, 71 Ontario patients died while waiting for coronary bypass surgery and over one hundred more became "medically unfit for surgery." The Canadian Broadcasting Corporation reports that "109 people had a heart attack or suffered heart failure while on the waiting list. Fifty of those patients died."

"Physicians across Canada are in an advanced stage of burnout due to work conditions" which "causes them to retire early...or simply leave," a former Canadian Medical Association president told the New York Times. He "attributed much of the problem to technological shortages and the powerlessness doctors feel when patients complain about long waits for treatment."

"Access to a waiting list is not access to healthcare," wrote Canadian Chief Justice McLachlin when striking down legislation banning private insurance in 2005. Last year a New York Times read: "As Canada's Slow-Motion Public Health System Falters, Private Medical Care Is Surging."

And England? The BBC reports that "up to 500 heart patients die each year while they wait for potentially life-saving surgery." The Times claims that a British woman "will be denied free National Health Service treatment for breast cancer if she seeks to improve her chances by paying privately for an additional drug." A Daily Telegraph headline reads: "Sufferers pull out teeth due to lack of dentists." Another article says that "doctors are calling for NHS treatment to be withheld from patients who are too old or who lead unhealthy lives."

Consider politically-controlled health care in America: Medicaid and Medicare. Doctors are five times more likely to refuse seeing new Medicaid patients than privately-insured patients.

Increasing reimbursement rates won't help much; more than two-thirds of doctors reported being overwhelmed by Medicaid's billing requirements, paperwork, and delays in payment. ABC News says that "Medicare rules bar cancer drugs for patients," including the privately-insured.

"Single payer" advocates cite international comparisons of life expectancy to support their cause. But life expectancy depends on factors unrelated to healthcare, such as unintentional injury and homicide. Health economist Robert Ohsfeldt found that when accounting for these two factors, life expectancy in America is comparable to that of Canada and England.

What really matters is your chance of surviving a serious illness. The American Cancer Society claims that "U.S. patients have better survival rates than European patients for most types of cancer."

So if politically-controlled medicine isn't the solution, what is?

Not a Massachusetts-style "individual mandate," which forces everyone to buy insurance. This is essentially single-payer in disguise. Insurance regulations severely limit competition, so insurance companies are effectively government contractors for politically-defined insurance.

The Boston Globe reports that to contain costs, Massachusetts authorities will "probably cut payments to doctors and hospitals" and "reduce choices for patients." Sound familiar? Instead, we must recognize how government policies have crippled free markets.

Because the tax code deeply discounts employer-provided insurance, you're essentially stuck with your employer's non-portable plans. Hence, insurance companies can afford to be stingy and deny you care; they know that losing you as a customer requires that you change jobs. With government as "single-payer" it's even worse: to change insurance providers you must move to a different state or country.

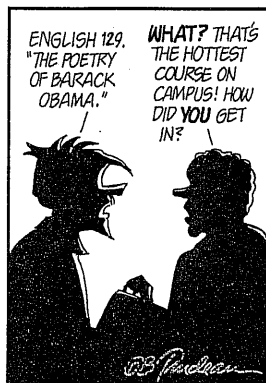
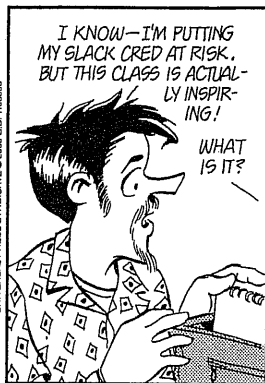
Our current system also encourages thoughtless over-consumption and skyrocketing costs. The tax code punishes paying for medical care out-of-pocket and rewards buying insurance. So "insurance" has become prepaid medicine, and patients over-consume like business travelers dining on their company's expense account.

[See THINKING, Page 12]

PAGE 11



DOONESBURY



BY GARRY TRUDEAU

LEARNING THE LAW

Give us nominees, please

By GRANT SULLIVAN

On April 4, 2008, Colorado will face an unprecedented emergency. No, it will not be from tainted mine shaft water, or a sink hole on the interstate. Rather, it will be from empty courtrooms.

On that date, three of Colorado's seven federal district court judgeships will be vacant. Judges Babcock and Miller are transitioning to "senior status," a quasi-retirement stage where they take on a significantly reduced caseload, while Judge Phillip Figa's post opened up last month when he sadly passed away after a lengthy battle with cancer.

These three vacancies will result in an even heavier burden being placed on the already overloaded district court docket (Colorado, mind you, is a state that, according to the Judicial Conference, is worthy of eight, not seven, district court judgeships).

Replace them, you say? With good reason, replacing a federal judge is no simple matter. Once nominated by the President, the life-time appointments are granted only after confirmation by the Senate and an extensive federal background check. But before even getting to that point, there is an unwritten rule that the Senators from the state containing the vacancy must agree on a list of possible nominees to send to the President. Therein lies the problem.

Colorado's Senators Allard and Salazar, being from opposite sides of the aisle, have failed to agree on a list of possible nominees, despite being given a year's notice that Judges Babcock and Miller will be moving to senior status this April.

To help illustrate this lunacy, imagine if, after being informed by Hank Brown last February of his intentions to step down as CU President, the Regents did nothing—didn't form a presidential search committee, didn't interview candidates, didn't do a darn thing. And now that Hank Brown's time is up, CU's top office sits empty. Not for a few days, or even a few weeks, but for months, perhaps years. As Colorado's chief district court judge, Edward Nottingham, recently noted, he is not optimistic that the vacant judgeships will be filled before 2009 or 2010 due

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to the current political climate.

Compounding this crisis is the confirmation process itself. Confirmation procedures are already unnecessarily prolonged, sometimes depriving the judicial district of a qualified judge for years. For example, Senator Arlen Specter recently wrote in an op-ed for the Wall Street Journal that a Fourth Circuit appellate judgeship has been vacant for an astonishing 13 years. Although a judicial emergency has been declared for that Circuit, and despite a qualified district court judge being nominated last July, no confirmation vote is yet on the horizon.

Democratic Senator Ken Salazar can't be faulted for thinking strategically. By forming a commission to recommend candidates to him, rather than just sitting down with his Republican counterpart and agreeing on a list, Salazar has delayed the nomination process indefinitely. By doing so, he increases the likelihood that the next President, possibly a Democrat, will get to ink the com-

missions of the new judges.

While I am sure Senator Salazar thinks the quality of judges selected may be improved by going this route, he risks pushing Colorado's district court to the brink of irreparable harm. With exploding dockets and jammed court calendars, the time that litigants and victims will be forced to wait for justice will increase dramatically.

With seven full-time judges in the courthouse, civil litigants in Colorado already wait an average 6.9 months from the time of filing to get their case resolved, and that's just the cases that don't go to trial. Those that do go to trial wait an average of 29 months before even seeing the light of a courtroom.

With just four full-time district court judges in Colorado (half of what is needed), these waiting times are bound to skyrocket, delaying justice and hemorrhaging our court system.

If there's anything that this campaign season has taught us, it's that the people are hungry for change, or, at the very least, for an end to partisan bickering. Our Senators should stop quibbling about the niceties of each qualified candidate's background, and work together to fill these vacancies as soon as possible. The health and functionality of our courts depend on it.

Grant Sullivan is a third-year law student from Irving, TX, attending CU Law School. He writes about matters of law and scholarship. The views expressed here are his own, and not necessarily those of the Colorado Daily management or staff.



