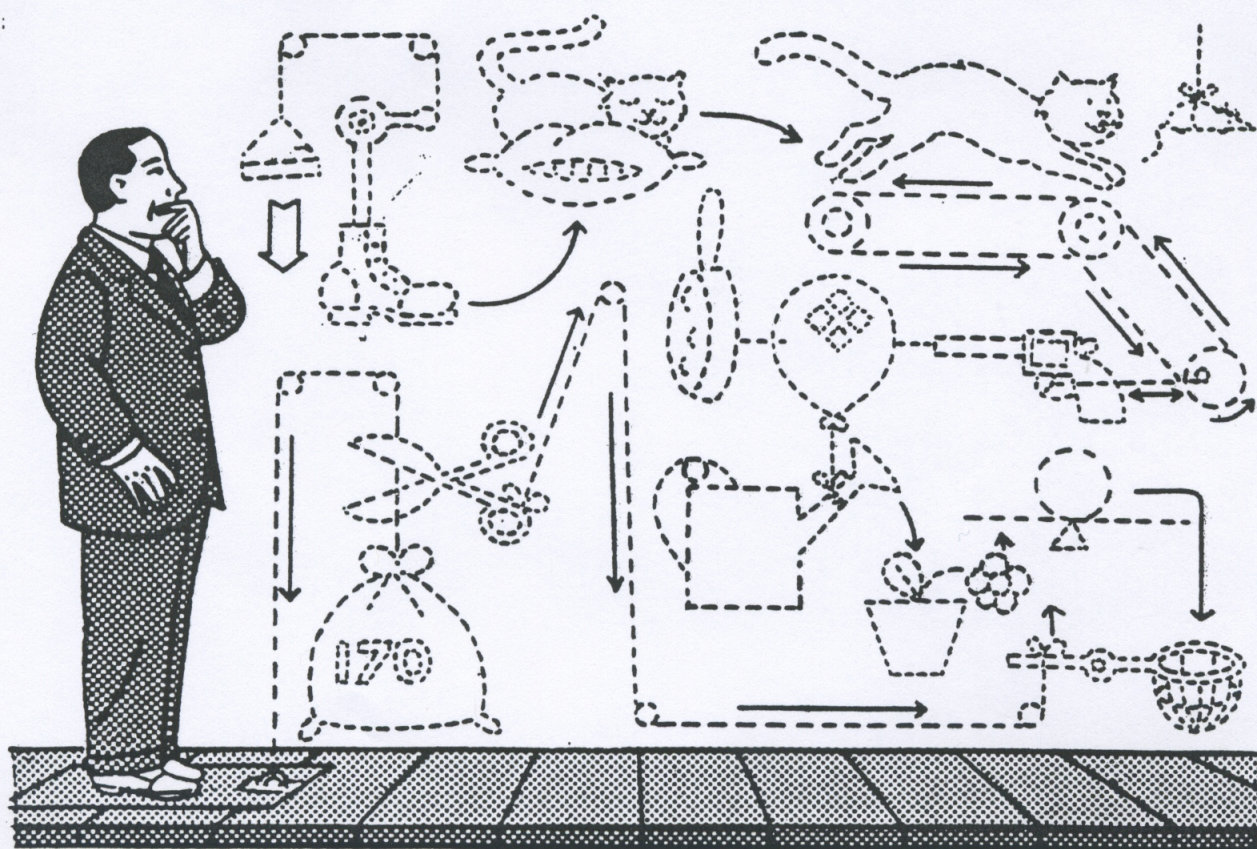
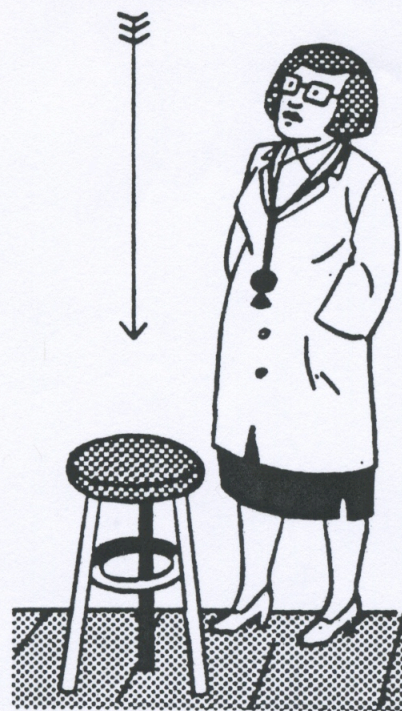


If Insurers Win, We Lose



Milan Trenc



By Melvin Konner

choose to have Travelers take away your choice of doctor or to have Aetna or Cigna take it away. Most of us won't be able to afford the option of free choice that we have now.

And the insurers will determine many other things as well. During the town meeting on "Nightline" in late September, the President answered a woman who was shocked to learn that her insurer, not her doctor, had decided when she would leave the hospital. He said unequivocally that under his plan the doctor would decide. This gaffe suggests that, despite his mastery of detail, he does not understand how managed care works — even though it is at the heart of his plan. The essence of managed care is that decisions are taken out of the hands of doctors and given to administrators with an eye on the bottom line.

It doesn't have to be this way. Do you know anyone in Canada? Ask them about their health care; they'll say it's excellent. Ask them about their freedom to choose a doctor; they have complete and open choice. Ask them about the waiting lists you have heard about; waits are shorter than in H.M.O.'s in America today.

A study in a September issue of The Journal of the American Medical Association found that the majority of H.M.O. patients are dissatisfied with their care. In a 1988 Harris poll, 97 percent of Canadians said they would

of the British nor the imaginary markets of managed competition, but the best compromise between professional entrepreneurship and communal responsibility.

The Clintons are fielding a bad plan. Single-payer is the crest of a breaking wave of real reform. It is now supported by 89 Representatives,

HEALTH CARE SECOND OPINIONS

An occasional series.

six Senators, Consumers Union, Ralph Nader's Public Citizen, The New England Journal of Medicine, the American Public Health Association, 5,500 members of Physicians for a National Health Program and labor organizations such as the Screen Actors Guild and the International Ladies Garment Workers Union. This is not the wave of the future but of the present.

"Why not simplify health reform?" the advocates of a single-payer plan have asked. Why not, indeed? Simplify, democratize and while we're at it, keep our free choice of doctor. □

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The Clinton health reform plan is a mess, but it's a mess in a particular way, for a particular reason.

All of us are baffled by the complexity of the plan. The Clintons want to hide behind that complexity. Don't worry, they seem to be saying. This is too complicated for you to understand. Trust us to do what's best.

Don't. They are taking away our choice of doctor. No amount of rhetoric or mastery of detail can conceal that fact. Their proposal will force most of us into managed-care plans like health maintenance organizations.

At my university, I serve on a committee that represents the faculty and staff in discussions with our year-old managed-care plan, run by a leading insurance firm. As such plans go, it is one of the best. Yet the leading complaint is that people have had to give up doctors they have known for years and choose from a small and hastily slapped together panel they've never heard of.

The fact is, managed care isn't profitable without administrative efficiency: the plan mustn't deal with

Give single-payer a chance.

too many doctors. And that in turn means little or no choice.

What? You say you tried the three gynecologists in the panel and didn't like them? One is too old and doesn't like your sex habits, the second doesn't have a minute to listen to your problems and the third grinned in a way you didn't like? Sorry, you should have thought of that when you joined up. All three are good doctors with clean records. Of course, you can always go elsewhere and pay for a big part of it out of pocket.

Doctors and patients will be herded into such plans. Your best friend has a great gynecologist and you want to go to her, but you love your pediatrician and the two are in different plans. Choose what's more important to you: your children's doctor or yours. The Clintons will make such forced "choices" universal.

They are already making false claims about increased choice. Read the fine print. They are talking about choosing among insurance plans, each of which offers a limited selection of doctors. So you will be able to

Journal of the American Medical Association found that the majority of H.M.O. patients are dissatisfied with their care. In a 1988 Harris poll, 97

percent of Canadians said they would not trade their system for ours. Unlike Britain, they do not have socialized medicine. They simply have state-run reimbursement.

President Clinton has said that to fund a single-payer plan we would have to replace \$500 billion in insurance premiums with new taxes. But he should know that all it would require would be a different way of accounting for the very same premiums. And, of course, an elimination of for-profit insurance companies in the field of health care.

Under the current system, insurance companies, like Las Vegas casino owners, skim many billions off the top of our health care dollars, offering in return only inefficient administration and harassment of care-givers. Wait, you say, they offer insurance! Sure, while in other countries this job is done far more simply and efficiently by their governments for no purpose except the public good.

For-profit insurers don't lance a boil, vaccinate a child, take out an appendix or comfort a grieving relative. Yet theirs has been the decisive voice in the health care reform debate.

A Feb. 28 article in The New York Times — "Hillary Clinton's Potent Brain Trust on Health Reform" — ran alongside a picture of 11 middle-aged white men, top executives from four H.M.O.'s run by insurance companies, and one each from the American Medical Association, a national hospital association and a drug manufacturer. Profits trust is more like it.

In the Prudential Insurance Company's 1993 newsletter, Bill Link, an executive vice president, said, "For [Prudential] the best-case scenario for reform — preferable even to the status quo — would be enactment of a managed competition proposal."

The Clintons are creating an insurance business oligopoly that will own a seventh of the economy. Insurers are moving aggressively into the delivery of care. Prudential, Metropolitan Life, Cigna and Aetna have each acquired H.M.O.'s and other managed-care companies that enroll millions of people.

This trend is likely to result in a vertical monopoly on America's health care, in which a few powerful insurers would control the delivery of care from the top down. Under a single-payer system like Canada's, we, the people, would be the owners. The for-profit insurers would at last be where they belong: out of the health business altogether. Health care was never a business in the first place. It was, and is, a public good, to be managed as a public trust.

What we really need is what the Canadian plan would give us: independent doctors and public financing

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