



HEALTH CARE for ALL NORTH CAROLINA

# Health Care for All NC Quarterly Newsletter Spring 2009

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## Inside this Issue

-1-

**Note from the President:  
Opportunities Galore**  
by Jonathan Kotch

-4-

**HCFA NC Makes a Name for Itself**  
by Jonathan Kotch

-2-

**What's Wrong with  
"Guaranteed Affordable"  
Health Care?**  
By Dennis Lazof

-5-

**Lively Annual Meeting Caps 2008**  
By Claudia Prose

-3-

**Fall Board Retreat**  
By Jay Miller

-6-

**Board Spotlight:  
Dr. Sharon Elliot-Bynum**

**SPECIAL REMINDER: Tuesday, March 24 5:00–7:30 p.m.**  
**Speakers will include Dr. J. Kotch, President HCfA NC**

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## Note from the President

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### Opportunities Galore

At both the state and national levels, this year will be a busy one with abundant opportunities for Health Care for All NC (HCfA NC). We are anticipating the release of the Report of the NC Institute of Medicine's Access to Health Care Study Group, which could be the basis for legisla-

tion expanding access to care in this legislative session. What HCfA NC's role will be in that process depends, of course, on what the Report and subsequent legislation actually say. It is likely that any new proposals will be gap-filling rather than comprehensive.

Federal legislation enabling the state to expand eligibility for S-CHIP, the State Child Health Insurance Program, was the second piece of legislation that President Obama signed.

Whether the state of NC has the will and the resources to add more of the state's medically indigent children to the program remains to be seen. Other groups are waiting in the wings for guaranteed access to care include employees of small businesses, the self-employed, dependents of covered workers whose employee benefits don't include them, and parents of medically indigent children.

What's most important for HCfA NC right now is that work be continued and pressure is maintained on achieving fundamental health care reform here at the state level. As usual, even among reformers, the loudest voices today are calling for a few incremental changes and pretending that eventually these might amount to everyone in our state having access to affordable health care. That's a fantasy, especially when the incremental changes involve further taxpayer subsidies for private health insurance companies. Furthermore, no fundamental change will ever come out of DC unless there is a groundswell of public support erupting from across the country.

Now is the time to be a part of that groundswell. When HCfA NC says that health care is a right, we really mean it. The opposition to Pres. Obama's economic stimulus package will seem like the gentle

will seem like the gentle zephyrs of spring compared to the windstorm of opposition that comprehensive, fundamental reform of our crumbling health care system will arouse from the right. Don't sit back and let the moderates race to the center with their tails between their legs seeking some kind of a compromise with the medical-industrial complex even before the debate has begun in earnest. There is so much that we need to do. Be a HCfA NC chapter chair, a speaker, a writer of letters and op-eds. Are you our next newsletter editor or webmaster or committee chair? Please reply to [pres@healthcareforallnc.org](mailto:pres@healthcareforallnc.org) and let me know.

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## What's Wrong with "Guaranteed Affordable" Health Care?

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There is nothing wrong with health care being *guaranteed* and *affordable*, just as nothing is wrong with genuinely *universal health care* (UHC). However, problems arise when organizations and politicians use these terms loosely, rendering them meaningless. It is important that the public comes to understand the responsible use of these terms. As an educational, non-profit organization, I felt that it was important for HCfA NC to speak on this issue.

The term UHC cannot honestly be used to refer to reforms such as those enacted in Maine and Massachusetts which might cut the uninsured rate in half. Similarly, the term *guaranteed affordable health care* has also been much abused as of late.

Allow me to distinguish that *Guaranteed Affordable Plans* include an increased role of for-profit insurance corporations. For-profit insurance corporations maintain a primary commitment to their shareholders. In the industry, patient care is referred to as "profit loss ratio", or rather, money lost from profit having been wasted on patient care. Simply put, these organizations are not committed to providing patient care they are committed to their financial bottom line. (*cont. pg 3*)

(from pg 2 - Guaranteed Health Care)

The March 13 issue of Raleigh News and Observer ran an article explaining that the administrative costs for the State Employees Health Plan are 18 times higher than the costs for administering Medicare in our state. Even if 2 or 3 times that would be cause for concern. Yet we are told that single payer health insurance is "not feasible" in our country or in our state?

Although HCfA NC is not as well endowed as other liberal organizations pushing *Guaranteed Affordable Plans* and although our stance may not be as corporate friendly - HCfA NC represents the only attempt in the state to actually guarantee that all residents have access to all appropriate health care on a regular basis.

- Dennis Lazof

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## Fall Board Retreat

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Health Care for All NC held a board retreat on October 12, 2008. It was a productive retreat which focused on our organizations strengths, weaknesses, opportunities and challenges. The result of our discussions produced an honest analysis of board development focusing on (1) increasing fundraising and membership and (2) expanding chapter development across the state and (3) furthering program development and communication.

Since October, we have been emphasizing membership among our group, which will support our goals in other areas such as development of more chapters and programs. Increasing our membership base is critical to the success of getting a bill passed and our ultimate goal of affordable and accessible Health Care for all North Carolinians. We need the income, the volunteer support, and the increased messaging that more members will provide. The income can be used to support speaking opportunities (travel costs, etc.) and increased exposure (lobbying, etc.). Please be sure and ask everyone who is interested in our goals to join the organization formally, which can be done easily and securely on our [website](#), and please contact us about volunteer opportunities through the website, or emailing to our [Volunteer Coordinator](#).

- Jay Miller

### **Want to Write an Op-Ed or Letter to the Editor?**

*We heartily encourage you to do so, especially in the area of health care reform. Want to sprinkle in current and carefully referenced facts into your article, but don't know where you can find them? Take a look at our "Key Health Care Facts" under "Resources" at our website.*

**For more information contact our Director of Research and Information Services, [RIS@healthcareforallnc.org](mailto:RIS@healthcareforallnc.org)**

### **Become a Member Today!**

*HCfA NC is the only statewide, member-based organization advocating for the right to health care. Without our members, Health Care for All NC cannot reach our mutual goal of ensuring access to care. We want you to be involved. Contact us if you have any ideas or suggestions: [ExecDir@healthcareforallnc.org](mailto:ExecDir@healthcareforallnc.org) or (919) 338-2535. Or to volunteer: [Volunteers@healthcareforallnc.org](mailto:Volunteers@healthcareforallnc.org)*

### **Our Mission:**

*Health Care for All North Carolina works to educate about and advocate for the "Right to Health Care", so that access to appropriate health care on a regular basis is assured for all North Carolinians regardless of age, sex, race/ethnicity, marital or employment status, pre-existing medical condition or geography. Adopted November 1998, modified December 2003*

**HCFA NC Makes a Name for Itself**

During the 2008 legislative short session, Health Care for All NC was both seen and heard. Verla Insko’s bill, H2688, to establish a Health Care Policy Council to “make recommendations to the General Assembly and the Governor for improvements and enhancements that will result in appropriate and affordable health care for all in North Carolina” attracted 49 sponsors and co-sponsors. HCFA NC was acknowledged for promoting the Bill that was debated and brought before the Committee.

Thanks to HCFA NC Vice President Bill Brooks’ leadership and Verla’s receptivity, many of the principles of health care reform generated by the three regional forums held in the fall of 2007 made it into the bill. Those regional forums, held in Asheville, Greensboro and Raleigh, were co-sponsored by the NC Nurses Association, the NC Pediatric Society, and the NC Community Health Center Association. In addition, Bill’s model lobbying program, 2 over 10, generated letters of support and visits to key legislators in the Raleigh offices on behalf of the Bill.

The outcome for H2688 was its insertion into H2431, the Omnibus Study Commission Bill, in the form of a Study Group under the auspices of the NC Institute of Medicine “to continue to study issues related to access to appropriate and affordable health care for all North Carolinians”. Last minute attempts to gut the charge to the study group were defeated, and the Study Commission bill, with the Access to Health Care Study Group intact, passed both houses.

The Study Group has completed its deliberations and approved its report unanimously. The report is still on its way to the printer prior to its being made public. That should happen any day, and when it does, look for a HCFA NC response. In the meantime, kudos to Bill and his team, Verla, and our lobbyist, Paula Wolf!

- Jonathan Kotch

**Lively Annual Meeting Caps 2008**

Our third annual meeting was held on December 4, 2008 and was opened with viewing of our new educational video. The response to the video was very positive. Viewers applauded and called it “very moving” and “a great organizing tool”. Our VP, Bill Brooks, guided the project, which was produced by Erika Rothman and partially funded by the Triangle Community Foundation.

PNHP recently called for loosely affiliated state organizations to make explicit endorsement of the national organization’s mission statement. Members voiced strong support for PNHP principles but also concern about losing focus on state legislative initiatives and being bound to support for a single-payer system. Consensus developed for endorsement of the PNHP principles along with commitment to continue pushing for NC reforms. Two new nominees for the Board were presented: Demetria Ledbetter and Gus Montavo. Two nominations came from the floor: Karen O’Donnell and Peter Kussin. The vote was unanimous for the revised Board slate: Jonathan Kotch, Bill Brooks, Julian Wachs, Claudia Prose, Miriam Thompson, Dennis Lazof, Gus Montavo, Mysha Sissine, Karen O’Donnell, Peter Kussin, Jay Miller, Sarah Jordan and Sharon Elliott-Bynum.

- Claudia Prose

**Board Spotlight: Dr. Sharon Elliot**

HCfA NC board member, Dr. Sharon Elliot Bynum, says that her vision of free health care for at-risk populations has become even more important than when



she founded a Durham nonprofit 14 years ago. "Health care costs are skyrocketing. People are losing jobs, so that means they're not going to have insurance coverage. They're going to have to go somewhere". For many of Durham’s at-risk that place was the offices of Bynum’s nonprofit, CAARE, Inc. often years after needing, but not being able to see a doctor.