

HealthCare/Prescriptions for Californians: Is There a Train Wreck Ahead?



2/7/2008



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This program operates under a grant from the California Wellness Foundation


Issues Facing Americans

- High Cost of American Medical Care (vs. the rest of the world)
- We are number 37 in the world for medical outcomes
(<http://www.who.int/whosis/indicators/2007compendium/en/index.html>)
- Who gets medical care? (hint: rich, good insurance, children covered by SCHIP, Medicare recipients, Medicaid recipients)



Medical Issues

- Who *doesn't* get medical care? (Underinsured and uninsured, plus people kicked out by insurers)
- The Uninsured: 47 Million and growing (7 million in California)
- Other Prescription Drug Issues: Errors and Collusion
- Fixing Medicare Part D



High Cost of Medical Care

- **Higher than any other advanced nation, by total dollars spent, % of economy, or per capita**
- **What is NOT to blame?**
 - Baby boomers aging
 - Medical malpractice
- **What IS to blame?**
 - Our wealth: willingness to spend more
 - Pay hospitals and doctors more



Who gets Medical Care?

- The richest: can pay
- The well-insured
- The poorest
- Children (maybe)
- Medicare recipients: over 65 and SSI
- Veterans

Who Doesn't?

- Working poor
- Those who work part-time jobs: temp, teachers, seasonal
- Unemployed
- People who are **really** sick



Solutions

- How does the rest of the advanced countries cover their people?
- Is insurance the only answer?
- The conversation has shifted from how do we provide healthcare to how do we sell insurance. Let's shift it back!



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California : Year of Healthcare Issues

- Roads we could have taken :
 - Sheila Kuehl's SB 840 (ignored)
 - Governor's Proposal
 - Perata Plan
 - Nunez Plan } give it to ins. lobby } combined as ABX 111 (defeated)
 - Republican Plan (dropped)
- STAY TUNED! What will be on your ballot?



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A philosophical divide

- Guaranteed, affordable health care vs. forcing people to buy insurance



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Gray Panthers Still Supports California's SB 840, Single-Payer Healthcare!

- **Security** - All California residents are covered for life.
- **Choice** - the freedom to choose your own medical provider. Delivery of care will continue as now to be private and public.
- **Comprehensive Benefits** - includes all care prescribed by a patient's health care provider, including hospital, medical, surgical, mental health; dental and vision care; prescription drugs and medical equipments, diagnostic testing, hospice care and more.
- **High Quality** - The plan invests in needed health care infrastructure such as electronic claims and reimbursement systems and statewide medical databases that improve health care quality.
- **Efficient Administration** - one comprehensive insurance plan saves the state, patients and providers billions of dollars each year.
- **Shared Responsibility** - Payment of an affordable premium by employers, employees and individuals supports the health care system we all need at some time.
- **Fair Reimbursement & Cost Controls**



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Maggie Kuehn's vision

- Maggie supported single-payer in 1970...
- and Gray Panthers have never wavered since!



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Remember Part D?

- Did it really work?
- Who's happy now?
- Can the mess be cleaned up?



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Medicare Part D

- Monthly Premium
 - Varies: average is \$31
 - Can be deducted from your SS check or paid directly to plan
- Annual Deductible
- Co-payments
- No coverage during donut hole Still pay premiums, even though no coverage
- Catastrophic Coverage



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Other Issues

- No negotiating for best prices like VA and Medicaid
- States can't regulate insurance plans
- Late Enrollment Penalty: 1% penalty per month and the penalty lasts forever
- Some retirees lost their creditable coverage for good
- Originally, insurance companies could change prices, formularies, co-pays, deductibles at will, but you couldn't change until Nov. enrollment period. Your complaints caused the CMS to force companies to keep you on the drugs you need until the next enrollment period.



Medication Errors: Types

Institute of Safe Medication Practices' Major Causes of Medication Errors

- Critical patient information is missing
- Critical drug information is missing
- Miscommunication of drug order
- Drug name, label, packaging problem
- Drug storage or delivery problem
- Environmental, staffing, workflow (lighting, noise, workload, interruptions, etc.)
- Lack of staff education
- Patient education problem (Lack of patient consultation, non-compliance)
- Lack of quality control or independent check systems in pharmacy
- Physician knowledge is lacking



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No More Vioxxes!

- Register all clinical trials and make results public
- Regulation of industry marketing
- JAMA standards
- Litigation (PAL)
- Best Buy Drugs (www.consumersunion.org)
- Drug Effectiveness Review Project (DERP): Oregon Health & Science University Evidence-Based Practice Center. Now includes 15 states and two non-profit organizations.
- Medication Errors Panel Report (CA State Cap.)



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Rx Marketing to Doctors

- Industry spends \$12 B/year on drug marketing to MDs, or \$13,000/doctor
- There is 1 sales rep for every 5 MDs
- Gifts, lunches, trips, educational grants, entertainment, free samples
 - Even small gifts create obligation and influence prescribing decisions
 - Free samples create loyalty to brand and unwillingness to use generics (30-80% lower cost)
- Doctors are paid to promote expensive new drugs and off-label uses



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The FDA and the Pharmaceutical Industry

- US drug prices are the highest in the world and getting worse. We paid 81% more for brand drugs (average) than Switzerland, Britain, Germany, Canada, Sweden, France, and Italy.
- FDA ties to Pharma (Tauzin)



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Solutions

- Negotiations
- Opening up US prescription drug pricing to world competition and free trade (Prescription Drug Importation debate)
- 2007 Pharmaceutical Market Access and Safety Act, HR 380 (Emanuel and Emerson) and Senate S-242 (Dorgan and Snow) - 30 co-sponsors)



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2007 Pharmaceutical Market Access and Drug Safety Act

- S 242 and HR 380
- Allows individuals, wholesalers and pharmacists to import from FDA-approved facilities in 30 countries
- Raises drug safety with provisions against counterfeiting
- Has provisions to stop drug companies from cutting off supply to countries



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Federal Congress people

Senators

<http://www.senate.gov/>

Boxer, Barbara- (D - CA) 112 Hart Senate Office Building, Washington 20510 (202) 224-3553

Web form:

www.boxer.senate.gov/email.html

Feinstein, Dianne- (D - CA) 331 Hart Senate Office Building, Washington DC 20510 (202) 224-3841

Web Form:

www.feinstein.senate.gov/email.html

Representative

Find your Congressperson:

<http://www.house.gov/Welcome.shtml>



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Where to Go For Help/Info

- Health Insurance Counseling and Advocacy Program (HICAP): Call 1-800-434-0222 to reach your local HICAP or go to www.calmedicare.org
- National Committee to Preserve Social Security and Medicare: <http://www.ncpssm.org/medicare/> (a national, nonprofit organization)
- Social Security: 1-800-772-1213 or go to www.ssa.gov
- Center for Medicare and Medicaid Services (CMS): Call 1-800-MEDICARE or go to www.medicare.gov
- Low income subsidy: go to www.ssa.gov/prescriptionhelp or call 1-800-772-1213



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Together, we can fix this!



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