

# Opinion

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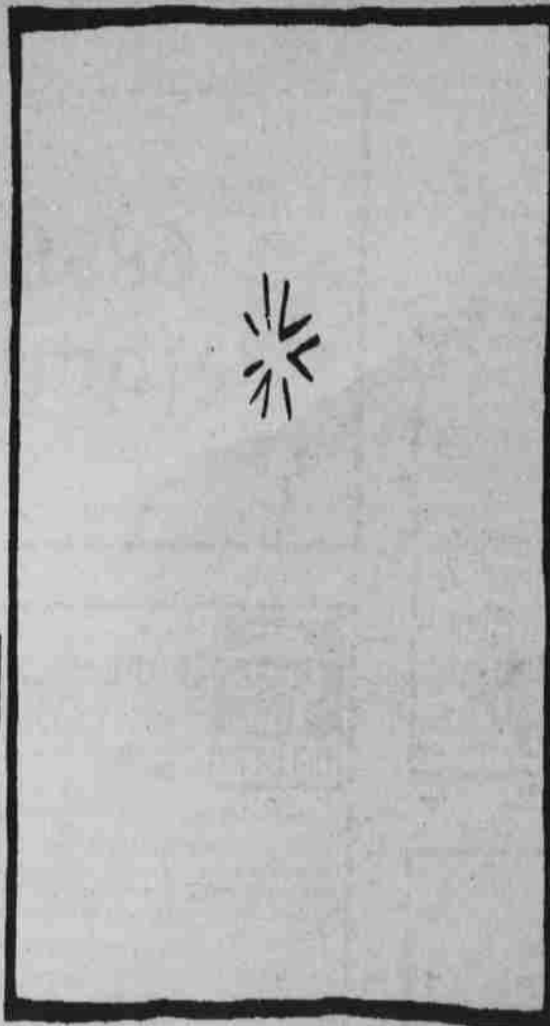
THE REBEL YELL

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THE TREMENDOUS  
DAILY BENEFIT  
OF A MIDDLE CLASS  
TAX CUT.



THE MIDDLE CLASS  
THAT EXISTS  
TO ENJOY IT.

## National health insurance: the time is now

by Thomas Cacho

No one denies that the nation's health care delivery system is in dire need of extensive structural reformation. Rather, the debate is over exactly how to accomplish such restructuring. And while bickering continues, the American public is slowly but surely becoming sick and tired of being sick and tired.

Presently, there are three suggested proposals advanced by members of the medical community and the government for restructuring the nation's health care system: the "play or pay" proposal favored most by Senate Democrats, President Bush's tax credit approach, and the institutionalization of a national health insurance program favored by many in both the medical and political communities.

Let me confess now. This writer is one of those most in favor of a national health insurance program, specifically the Health U.S.A. Act of 1991 (Health U.S.A.), introduced by former presidential candidate Senator Bob Kerrey of Nebraska. "Play or pay" proposals, which demand that employers provide health insurance coverage to their employees or else contribute to a state-run health insurance program, are too controversial (already eliciting a vicious backlash from the business community), are at best quick-fix measures and in the long run, are much too cost-

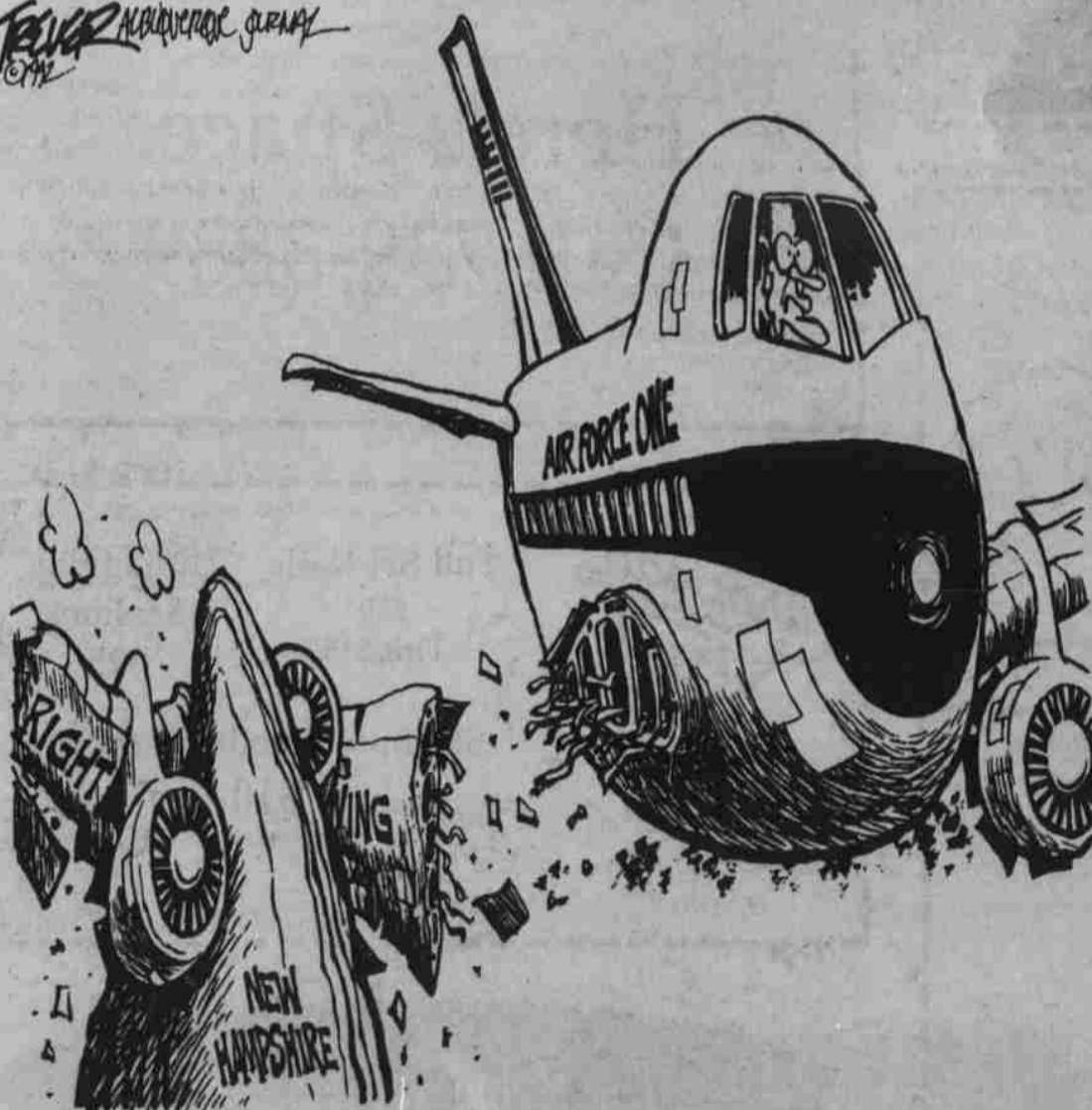
ly. President Bush's market-oriented tax credit approach is pitifully inadequate and was obviously constructed in haste merely to placate frustrated voters during his presidential campaign.

Sen. Kerrey's Health U.S.A. proposal, as outlined by E. Richard Brown, in the January edition of the *Journal of the American Medical Association*, would "provide coverage of the entire resident population for comprehensive medical and preventive health and long-term care services through a universal tax-funded financing system."

Health U.S.A. would separate coverage from employment, ensuring uninterrupted coverage. Additionally, it would improve access to primary care, encourage more equitable financing of health services, and reduce the presently enormous administrative costs of health care financing. Failure to implement a plan in the near future that would completely restructure our present system of health care delivery (which is obviously not working), will result in the continuing increase of health care costs and likewise the inevitable increase in the number of uninsured Americans, presently 40 million. Health U.S.A. addresses and effectively tackles these two fundamental problems of our present health care delivery system.

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