

## **They Opposed Medicare Too (Huffington Post)**

**July 31, 2009 By U.S. Rep. Rush Holt**

I recently talked with a Central New Jersey constituent about health care reform and my belief that we need an optional publicly administered health insurance plan. He objected, voicing concern that government should stay out of the health care business. Government-run health care would be inefficient. It would be costly. It would put the government between him and his doctor. It would mean socialized medicine.

How did he pay for his health care, I asked.

"Medicare" he responded.

This week we marked the 44th anniversary of the creation of the Medicare program. With former President Harry Truman - a strong advocate for national health care - at his side, President Lyndon Johnson signed the program into law.

Today, we hear strong echoes of that debate: inefficient and costly government. Putting the government between the doctor and the patient. Socialized medicine.

Although Medicare now is widely seen as a successful program for helping Americans access health care, it was very controversial when it was passed. The same arguments against health care reform today were made then. Some leaders from Bob Dole to Gerald Ford fought the program and voted against its creation.

Before Medicare was enacted, 44 percent of seniors were uninsured and, of those that had insurance, most had coverage only for hospital care. Before Medicare, seniors had limited choices for their health care. They could deplete their savings, seek assistance from their children, look for charity care, or forgo the medical care they needed.

Within 11 months after President Johnson signed Medicare into law, almost 20 million

Americans had enrolled in the program. Medicare has virtually eliminated uninsurance among older Americans, and today fewer than one percent of those age 65 or older lack health insurance.

Today, Medicare covers 44.1 million beneficiaries with an overhead of approximately 2 percent. Medicare's low administrative overhead and efficiencies of service have helped Medicare's costs grow at a slower rate for the past five years than private health insurance for the same benefits, despite seniors' higher need for services. While Medicare may not be perfect and every year the government makes some changes, it has been a godsend for millions of seniors. It provides basic, affordable, universal health care to a population abandoned by private industry decades ago. We can and should make improvements to Medicare, especially as health care -- technology, practices, the role of pharmaceuticals -- has evolved.

This year, we are debating the next stage of health reform that would fix the broken health insurance system. Some have voiced concerns that America's Affordable Health Choices Act, the health care reform legislation currently being considered by the House of Representatives, would weaken Medicare. In fact, the opposite is true. Our legislation would benefit seniors by strengthening this successful program.

The bill would eliminate the doughnut hole in the Medicare prescription drug benefit. Each year, 7,900 seniors in New Jersey's Twelfth District, which I represent, face the Medicare doughnut hole and are forced to pay their drug costs after Medicare reaches the limit of what it will pay. The legislation would provide them with immediate relief, by cutting brand name drug costs in the doughnut hole by 50 percent and ultimately eliminating the doughnut hole (too slowly, I think, but nevertheless really eliminates it). The bill would eliminate co-payments and deductibles in Medicare for preventive services, to ensure diseases are treated at the earliest stage and to keep people well. The legislation goes further to create new Medicare incentives to encourage physicians and hospitals to coordinate medical care and therefore eliminate duplicate tests, x-rays, and labs.

Just as we are strengthening health care for seniors, we have an opportunity to strengthen health care for all Americans. By passing the America's Affordable Health Choices Act, we would provide stable coverage that cannot be taken away. The bill would ensure Americans always have a source of coverage even if you are in between jobs, lose your job, or your job doesn't provide it. It would ensure families have stable health costs that won't threaten their finances. Americans would not have to worry about leaving the hospital with bills too big to pay because their benefits have run out. Moreover, the bill would set an annual cap on out-of-pocket health expenses in order to eliminate cases where one disease forces a family into bankruptcy.

(It is worth noting that 60 percent of family bankruptcies involve a major health expense.)

This week, it is instructive not simply to commemorate the creation and success of Medicare but to remember the long struggle that led to this successful program. The program is so successful that some do not even think about its operation by our government. One American wrote a letter to President Obama saying, "I don't want government-run health care. And don't touch my Medicare." Another told one of my Congressional colleagues at a town hall to "keep your government hands off my Medicare."

More than 40 years ago, Congress and the president were right to enact Medicare.

I predict that more than 40 years from now, today's cries of "socialized medicine" and today's political chatter about who is benefiting from the debate will have faded. Instead, it will be noted that we did the right thing by finally ensuring that all Americans have health care security, a goal that has eluded our nation for a century.