

Allen's Word

Health care reform is a phrase that has become shrouded in confusion and controversy. Therefore, I am going to write about the topic of health care reform and explain how this radical change will affect you. Hopefully, you will take an interest in this debate like I have.

Basically, health care reform means changing our current health care policy in order to improve its efficiency. Now, some would argue that there is no need for adjustments. The facts, however, speak quite differently. According to www.healthreform.gov, "Americans spend more on health care than any other country in the world, yet we do not live longer." Furthermore, www.cnn.com states that "Nearly 46 million Americans have no insurance, and 25 million more are underinsured." The argument should not be over the need for reform but how to reform.

The vision President Obama has for health care is the cause for much of the controversy. Basically,

the idea is that the government will provide universal health care, health care for any person who needs or wants it, introducing competition between the government's offered care and the private insurance company's offered care. That competition, theoretically, should lower prices of health care, enabling more people to afford the care they want. This is called a public option.

There are other notable changes that a universal plan would enforce. Purchased coverage cannot be dropped if the person becomes ill, and the condition is not listed on the application. Denying coverage to people due to a pre-existing condition will be illegal. Preventive care services, like flu shots or diabetes tests, will be accessible for free.

There is little doubt that these changes would not improve the system. Again, the controversy is how they are creating these changes. There is much worry about the government offering a public option.

As a capitalist country, some Americans feel that the health insurance market should be controlled by the private sector and not by the government. Otherwise, the feder-

al government will have too much power.

An alternative to the public option is a co-op system. A co-op is a nonprofit insurance company that is operated by its members, the people who are covered by the company. Private insurance companies are different, because they are controlled by the investors that own stock in the company. The private companies will be competing with the co-ops rather than a universal plan.

A major task the government will have is providing the funds to run a new health care program. Raising taxes is one possibility for a solution to this problem. Americans have countering opinions on the idea.

Government and American history teacher, Aaron Law, is open to the idea of an increase in taxes.

"I don't see why we cannot extend a hand to all Americans to help them," he says.

High school students, even though they do not pay for health insurance yet, should still take an interest in the debate and outcome. The success or failure of reform will have the most impact on younger generations. I encourage students to take an interest in this debate and politics in general.

What's Up?

Do you think healthcare reform is a good idea?



Charlie Bollinger, Secretary
"Yes. I believe changes need to be made; however, I don't think the government should control it."



Justin, Sr.
"No, because it will hurt the other health insurance agencies, and also the ones who don't need it will take advantage of it."



Breanna, Jr.
"Yes, I want the same as the senators have."



Josh, So.
"Yes, because it gives poorer families a chance for care."



Raylene, Fr.
"Yes, because it has to deal with the health of America."

Top five universal health care reform myths

1. Euthanasia is required or encouraged in the bill.
2. Abortion services are covered in the plan's benefits package.
3. The bill forces private insurers out of business.
4. There will be more rationing of care with the universal option.
5. Health care reform will bring quick changes.

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2. All letters must be signed even though the name(s) may be withheld.
3. Joint letters should contain no more than ten names. If more appear, only ten will be published. A complete list of all other names will be available from the staff.