

Feingold would give states sway over health care

Proposed legislation would fund experiments in universal coverage

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U.S. Sen. Russ Feingold (D-Wis.), a possible 2008 presidential candidate, on Monday unveiled a draft of health care reform legislation that deviates from decades of health policy by encouraging a shift of legislative innovation to the state level, away from the federal government.

"The consensus is emerging that there ought to be flexibility from state to state," without Washington dictating how states run their health systems, Feingold said Monday after he appeared at a health clinic in Milwaukee to publicize his State-Based Health Care Reform Act.

Washington's lawmakers, the senator said, are deadlocked without consensus on health policy.

The senator's proposed \$32 billion, 10-year legislation, which Feingold said he will introduce this week in Congress, is meant to provide funding to a handful of pilot states that experiment with models of universal medical coverage at the state level. The plan coincides with a burst of state initiatives from Massachusetts to New Mexico and Tennessee.

Feingold's proposal foresees the creation of a non-partisan Health Care Reform Task Force that will review state applications and initially dole out five-year grants to two or three states with plans that

most of them centered on the so-called "working poor" who work without benefits and cannot afford private insurance.

Feingold's plan is notably restrained in its scope and price tag compared with past medical insurance reform proposals. As recently as the last presidential election, Democratic hopefuls espoused federal coverage plans estimated at as much as \$214 billion a year.

The senator's proposal lacks detail, leaving that to state lawmakers. Feingold said his plan is unrelated to a possible presidential bid.

Medical economics has emerged as one of the key issues of competitiveness in a globalized world. Loss-making General Motors Corp. complains that it cannot build cars at prices that compete with rivals in Germany and Japan, where the government, not the corporations, covers workers' health care. At \$1.56 trillion, U.S. health spending already equals the size of the entire economic output of France, according to the Henry J. Kaiser health care foundation.

"Feingold's legislation is an admission that he doesn't see the federal government doing anything for national policy," said state Rep. Sheldon Wasserman, a Milwaukee Democrat and a practicing gynecologist who supports comprehensive health coverage.

"There's no national consensus, and the different lobbies are too strong," Wasserman said. "If they are finally admitting they cannot do something on a national basis, then turn it over to the states and give the states the money."

Feingold said he cannot guarantee that Wisconsin would be selected among the first states in the plan, if the legislation succeeds, but he said Wisconsin policy-makers already have several proposals that should help Wisconsin qualify.

"It would certainly be helpful to have that big carrot," said David Riemer of the Wisconsin Health Project, a group behind one of the plans under consideration in Madison.

Riemer's plan, sponsored by state Reps. Curt Gielow (R-Mequon) and Jon Richards (D-Milwaukee), is called the Wisconsin Health Plan. Some see it as Wisconsin's version of the legislation passed this year in Massachusetts that's designed to ensure that nearly everyone under age 65 in that state has health care coverage. Like the Massachusetts legislation, the Wisconsin Health Plan would use a mix of mandates and market solutions to expand health insurance coverage.

Another plan in the Wisconsin state Senate was pushed by David Newby, president of the Wisconsin AFL-CIO. It would create a new statewide insurance pool by charging a standard flat fee per worker per month that would be open to public and private employees across the state. It would cut costs with bare-bones administrative costs,

eliminating the intermediate role of insurance companies and focusing on those who already have a job.

Feingold, appearing at the Milwaukee Health Services Inc. clinic on King Drive, said his pronouncements on health care mark the first of several major domestic policy issues that Feingold will publicize this year. Feingold said the other issues will involve "jobs and employment, the situation in cities and urban centers," as well as rural economic issues.