



SECRETARY-TREASURER'S MESSAGE

You know a topic is important if I devote two columns to it within a five-issue span.

This past summer, I noted our Brotherhood's concern about health care cost increases and the failure of U.S. elected officials to address this crisis. At that time, overall health care costs, including prescription drugs, were rising at twice the rate of inflation, but the cost of managed care plans was not increasing as fast.

Now, the other shoe is about to drop, says a *Wall Street Journal* roundup, and we're going to see increases in managed care costs of 8 to 12 percent in the year 2000 and thereafter. This analysis comes at a time one national news magazine uses the headline "HMO Hell" on its cover to sum up the national dissatisfaction with coverage, cost and quality of HMOs, the primary vehicle with which the "market" was supposed to ease the crisis in health care.

Most disturbing in these reports is one employer's description of why the big increase. "In trying to buy market share through acquisitions," he said, "health plans ended up with a crazy quilt of computer systems that couldn't talk to each other, slowing down payments, test reports and the flow of other vital information. This year [one provider] discovered it had 18 separate databases littered with hundreds of home grown codes and 20 different payment plans for doctors." You shudder a little at the thought that someone's health is at risk because test results or "other vital information" are lost or muddled. Health care is, of course, a business, but it is too important to be left to the normal rules of the market.

Right now, health care is in its rightful place in the middle of national political discussion. A "patients' bill of rights" is now being debated instead of just stonewalled by the Congressional majority. And several of the major candidates for President in 2000 have put forth national health care reform proposals. That's quite a contrast with what has passed for campaign "issues" in many recent elections.

One problem, however, is that everyone seems to be looking for a "magic bullet" system that will answer all concerns, solve all problems, and let us stop worrying about the issue of health care. I doubt such a tonic will ever happen. Our Brotherhood has one example that shows clearly what it takes to trim costs and still make certain our members are adequately protected—hard work and constant attention to the details.

The joint health care cost-containment committee created by IBEW, CWA and AT&T management (and, in 1996, Lucent) proves costs can be reduced while retaining quality of care. But it takes a tremendous amount of unity and vigilance to stay abreast of developments. Throughout the 1990s, new problems emerged constantly and were addressed by the committee with the results closely monitored. In all but one round of bargaining since 1990, the cost-containment committee has presented the negotiating team with an agreement that could be incorporated directly into the contract.

Unfortunately, this success can't be duplicated everywhere. One lesson, however, is clear. Working people have a much better chance of obtaining solid health care for the most reasonable cost possible when they act collectively, i.e., through their unions, to take control over this highly important issue. We must approach health care as we approach most other major purchases with a stern eye and a demand for quality and affordability. Any "solution" that doesn't recognize this and searches in vain for the magic potion will only be as effective as a sugar pill to a heart patient. ☐



Here
We Go
Again

EDWIN D. HILL

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