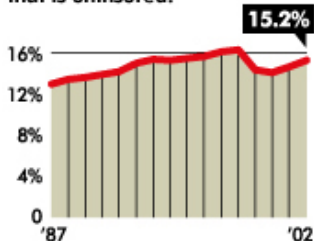


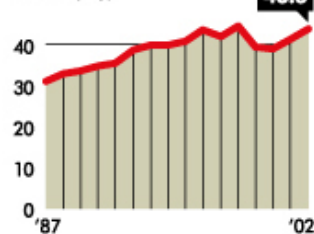
What's wrong with our health care system?

More people lack coverage

Percentage of the population that is uninsured:



Number of uninsured, in millions:



Source: Census Bureau

The problem is...

FACT: The United States spends \$1.4 trillion on health care – more than twice the average of other developed nations. Yet it is behind most of the developed world on major health indicators such as infant mortality and life expectancy.

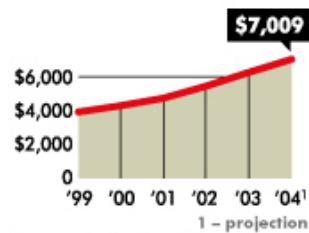
FACT: Most developed countries provide some form of universal health insurance coverage. But in the U.S., more than 43 million Americans have no health insurance and many more are underinsured. Even the well-insured have found their health compromised when their insurance company or HMO denies payment for certain procedures or medication.

FACT: Yearly average premium increases of 12 to 16 percent are forcing many businesses to drop employee coverage or demand that workers pay more. The average share that workers pay for health insurance premiums has increased by nearly 50 percent since 2000.

Health care costs rise

The total premiums paid by employers for health insurance have risen rapidly in the past few years.

The average annual health care cost per worker:



Source: Hewitt Associates

Something has to be done...

Reforms to the health care system are long overdue. Now almost all politicians, employers, health care organizations and advocacy groups are offering proposals to fix it.

Unfortunately, we already know what corporate America wants. Just look at what employers and the government are doing to working people now:

- Employers are making workers pay higher premium costs, and bigger co-pays and deductibles. Many companies are dropping or cutting back on retiree health benefits.
- States are cutting services and public health programs, while shifting the tax burden from rich people to working people to pay for them.
- Recent changes in Medicare will enrich drug and insurance companies.

Working people need...

Working people need secure, affordable health care coverage – even if they get laid off, change jobs, become sick or disabled, retire, or work part time. Today, eight out of ten uninsured or underinsured are from working families.

Yet now we are being asked to pay more for less health care coverage. Meanwhile, HMOs, insurance companies, and drug manufacturers are making billions in profits.

Is there a solution that will work for working families?

See the next page for more information



Jobs with Justice is a national coalition for workers' rights. **To get involved contact your local Jobs with Justice coalition at 502-625-3724. For more information call (202) 434-1106 or visit www.jwj.org.**

There is one insurance plan that provides secure, affordable health care...



It's called Medicare.
The nation's largest and most efficient health insurance

for doctor's fees and outpatient services is paid for by an individual premium (\$58.70 per month in 2003) and general federal revenues.^{2[2]}

Does it save money?

Currently we spend about 30 percent of total health spending on insurance company profits and red tape. Medicare's administrative overhead is less than three percent.^{3[3]}

program already covers the vast majority of people over 65 years old.^{1[1]}

How is it paid for?

Medicare's hospital insurance (and limited nursing home care) is paid for by a payroll tax of 1.45% on earnings that is matched by employers. Coverage

How does it control costs?

Because the current Medicare program covers so many people, it has the clout to negotiate low discount rates with hospitals and doctors.

But the new Medicare prescription drug law undermines it!

It's estimated that a national insurance program based on Medicare could save \$200 billion annually by eliminating high overhead costs and through reductions in unnecessary marketing. It could negotiate deep discounts and make it possible to set and enforce overall spending limits. *The savings would be enough to provide comprehensive coverage for everyone.*⁴

But instead of *expanding* and *improving* the existing Medicare program to cover everyone, the

special interests who profit from the current failed system are attacking it! With support from Pres. Bush, **the new Medicare prescription drug program encourages companies to cut back or drop retiree benefits, locks in high drug prices and allows for the privatization of Medicare.**

Only with increased membership involvement in health care reform issues, can we hold our elected officials accountable for the secure, affordable health care that working families need.

Be part of the solution!
Join Kentuckians for Single-Payer Health Care!

Contact Kay Tillow at 459-3393 or nursenpo@aol.com for more information

^{1[1]} For more information, contact the Centers for Medicare & Medicaid Services, 7500 Security Blvd., Baltimore, MD 21244. Tel: 800-772-1213, Web: www.medicare.gov.

^{1[2]} Summary of Medicare based on "Medicare 2003: What you need to know about Medicare in simple, practical terms," 20th edition, Mercer Human Resource Consulting, Dec. 2002.

^{1[3]} "Costs of Health Care Administration in the US and Canada," *New England Journal of Medicine*, August 21, 2003.

^{1[4]} Summary is based on "Proposal of the Physicians' Working Group for Single-Payer National Health Insurance," *Journal of the American Medical Association (JAMA)* August 13, 2003.

^{1[1]} For more information, contact the Centers for Medicare & Medicaid Services, 7500 Security Blvd., Baltimore, MD 21244. Tel: 800-772-1213, Web: www.medicare.gov.

^{2[2]} Summary of Medicare based on “Medicare 2003: What you need to know about Medicare in simple, practical terms,”

20th edition, Mercer Human Resource Consulting, Dec. 2002.

^{3[3]} "Costs of Health Care Administration in the US and Canada," *New England Journal of Medicine*, August 21, 2003.

^{4[4]} Summary is based on “Proposal of the Physicians’ Working Group for Single-Payer National Health Insurance,” *Journal of the American Medical Association (JAMA)* August 13, 2003.