

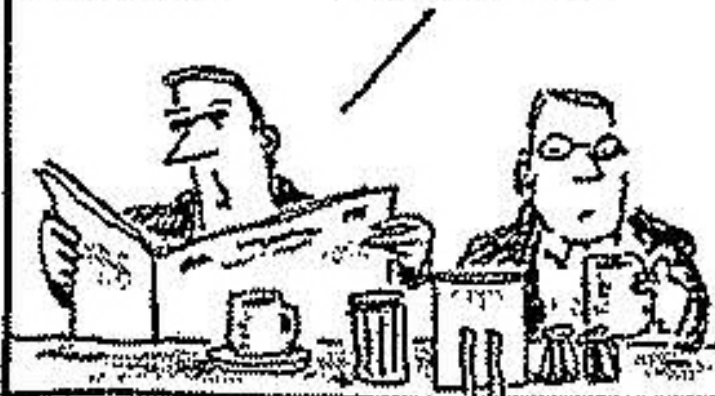
Three Ethical Issues for Health Care Reform

Justice

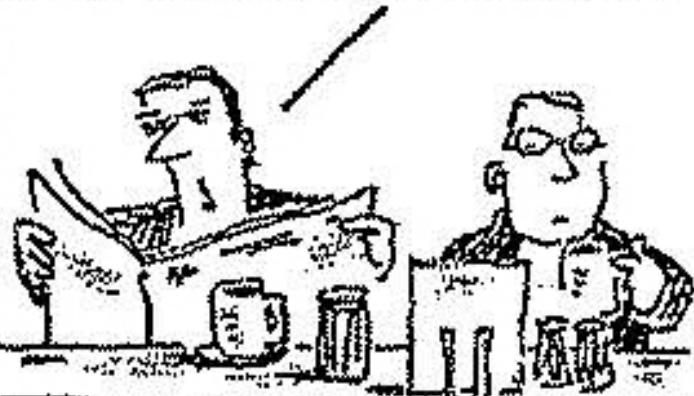
Dignity

Stewardship

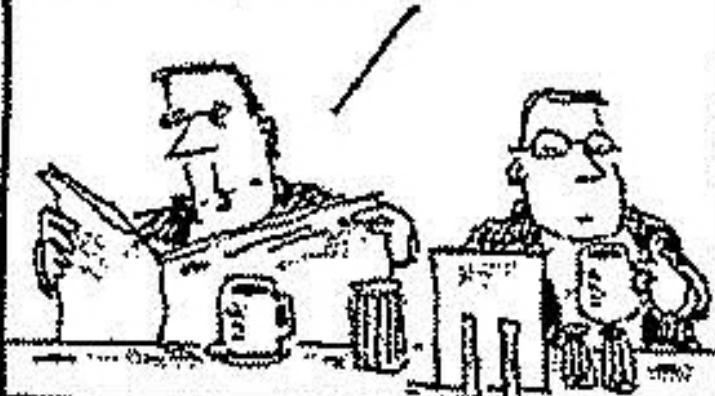
THE NATION IS FEELING MORE
ANXIOUS AND VULNERABLE



AMERICANS FEAR THE UNEXPECTED
COULD STRIKE AT ANY MOMENT...



"DEVASTATING THEMSELVES
AND THEIR FAMILIES



THAT'S WHY THEY WANT ...
HEALTH INSURANCE



Justice

Health care free for prisoners and
unaffordable for the working poor.

Who are the uninsured?

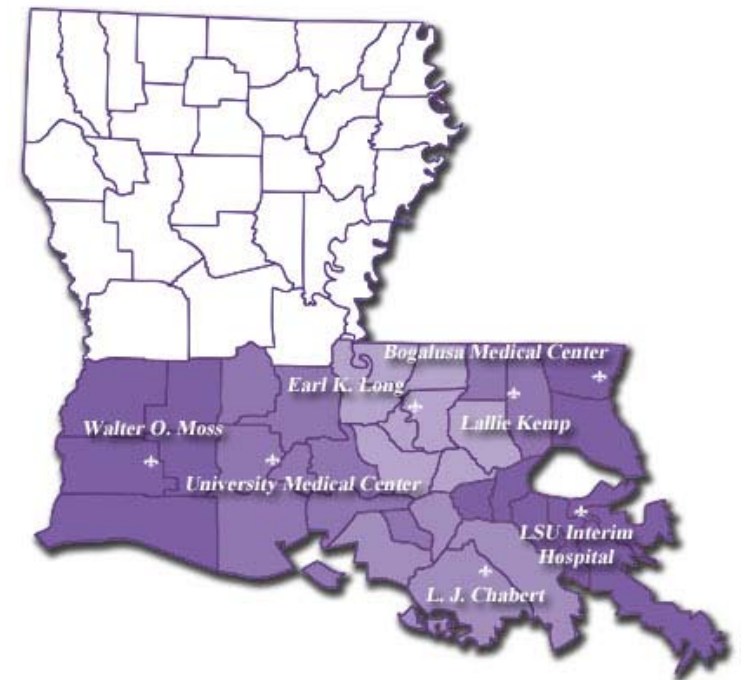
- 47 million and growing annually
- Primarily low income workers at small companies
- Average family health care policy \$12,000, minimum wage income = \$12,000.

Options for the poor to obtain health care

- Limit income and live in poverty (Louisiana live below 17% of the federal poverty level)
- Work for cash and dishonestly report income
- Find a low income job that would be sufficient to meet family needs and provide health care



Earl K Long Hospital



Estelle v. Gamble

“These elementary principles establish the government's obligation to provide medical care for those whom it is punishing by incarceration. An inmate must rely on prison authorities to treat his medical needs; if the authorities fail to do so, those needs will not be met. In the worst cases, such a failure may actually produce physical “torture or a lingering death,”...” 1976

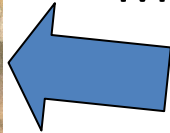
Expansion of Estelle v Gamble

- Adequate treatment of HIV
- Hepatitis therapy
- Renal transplantation of patients on death row
- Heart transplant to a convicted felon in 2002 in California
- Growing problem for the prison system especially with the aging population.

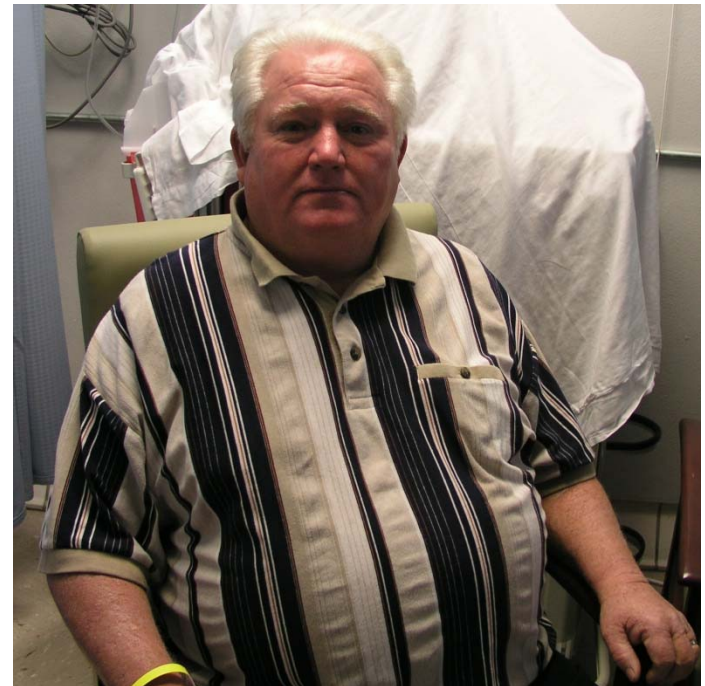
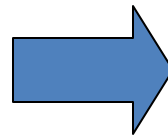
Who has medical coverage?



- Convicted Felon
- Serial Murderer



- Pastor of small church
- Retired businessman



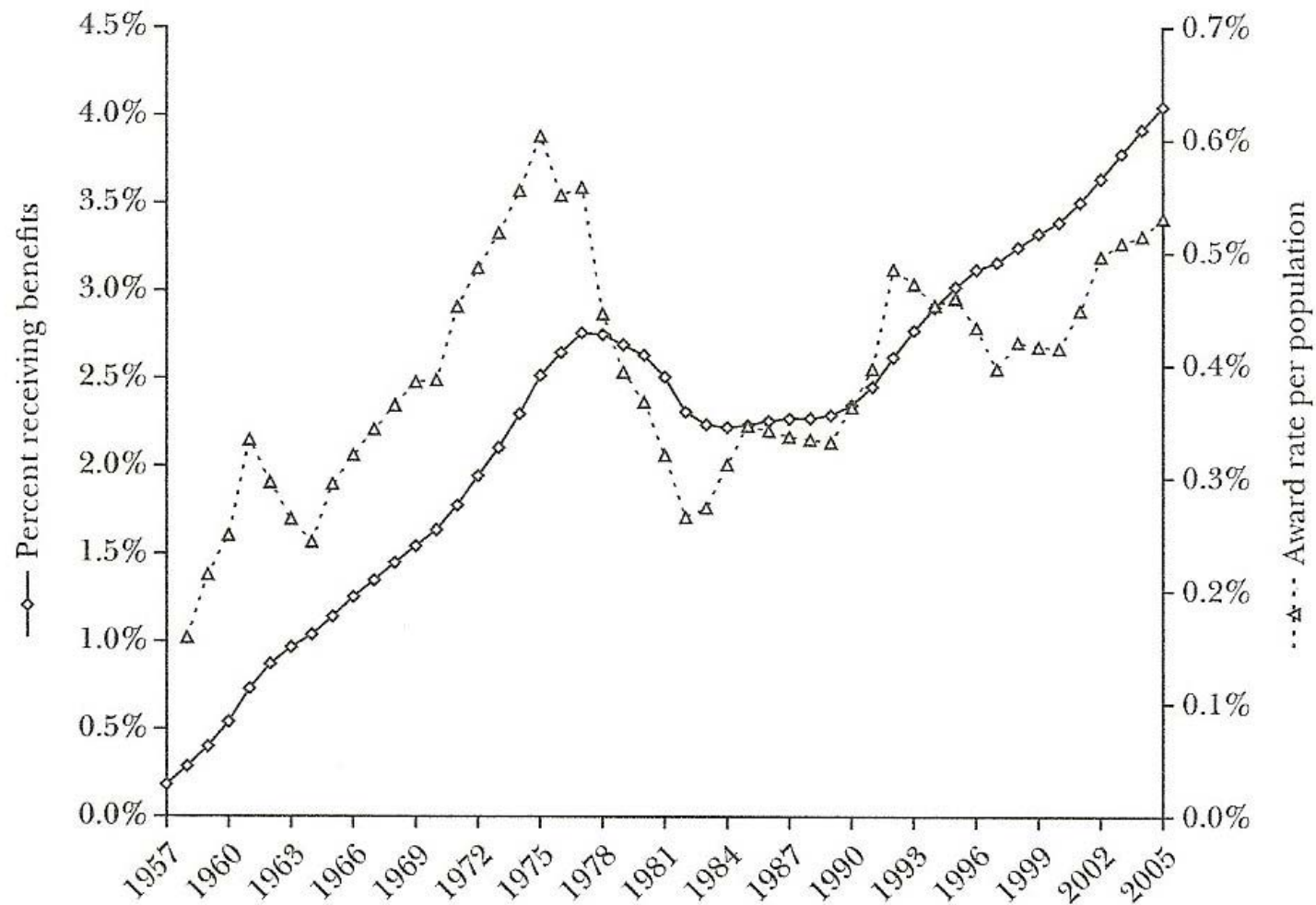
Disability

Destruction of human dignity for a
pension and health care

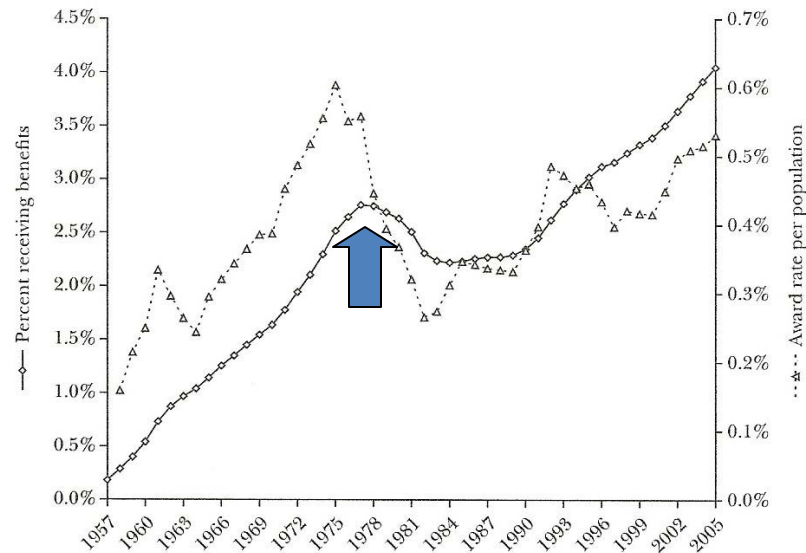
Disability System

- Social Security Disability v Supplement Security Income
- Continuous disability for 5 months, eligible for Medicare after two years of disability
- Established in 1955, originally targeted male workers performing manual labor and disabled by heart disease and cancer.

Growth in Social Security Disability



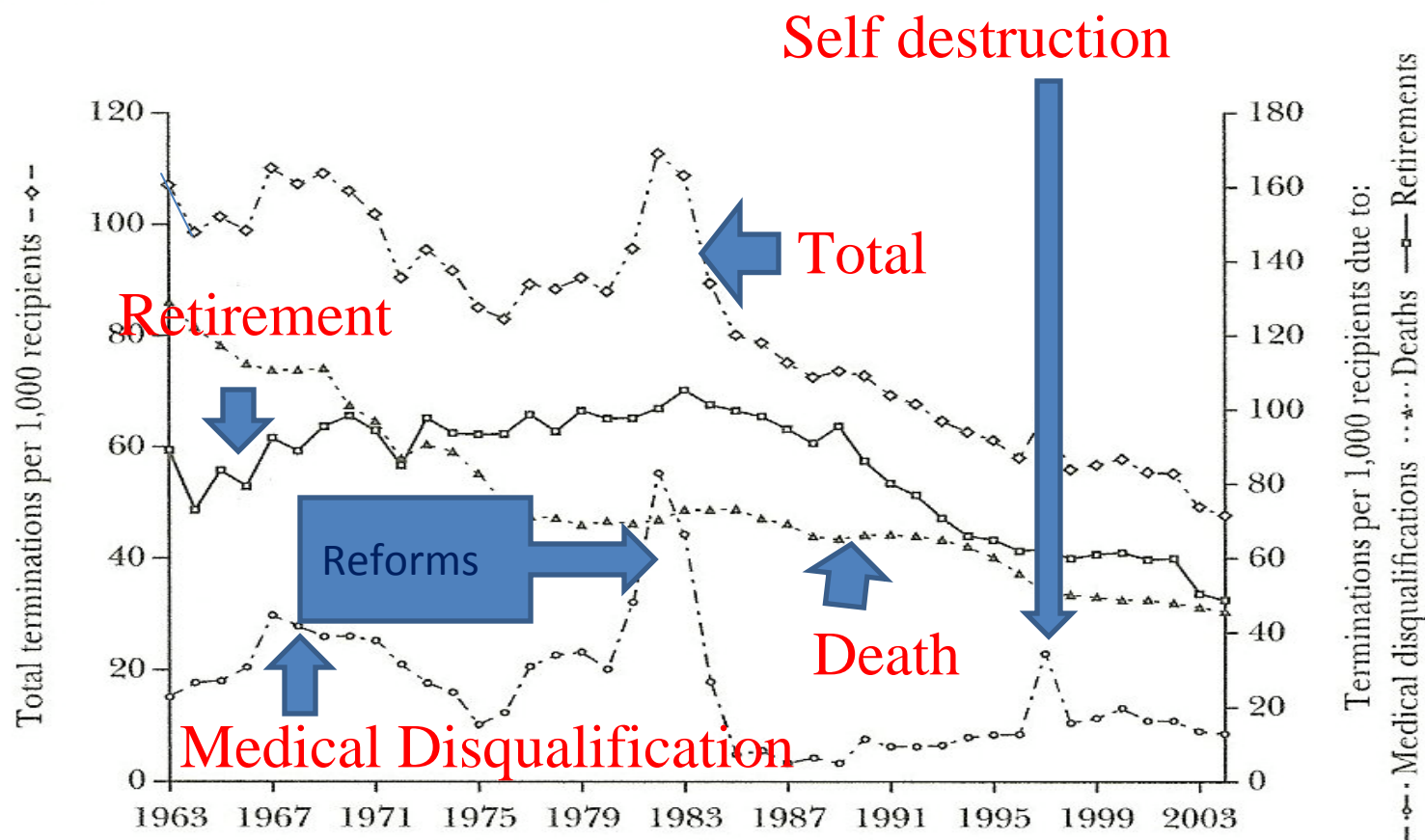
Growth in Social Security Disability



1. Limit disability benefit levels
2. Establish periodic reviews
3. Enhance rehabilitation and work incentives
4. Withhold benefits from prisoners

Disability Terminations

Disability Insurance Termination Rates per 1,000 Beneficiaries by Reason, 1963–2004



Source: Social Security Bulletin: Annual Statistical Supplement (various sources).

Wage replacement with Disability

males ages 50-61

Percentile of earnings	1984 wage only	2002 wage only	1984 wage + benefits	2002 wage + benefits
10 th	55.2 %	64.0%	67.8%	86.0%
50 th	34.7%	45.9%	34.1%	46.4%
90 th	19.0%	23.7%	18.2%	22.4%

- Increases in wages are tied to median, bottom 10% falls behind
- Benefits included Medicare and takes into account that few jobs lowest 10% have health care or other benefits
- Award amounts for the highest income are greater in absolute #

Special Education students at work.



Stewardship

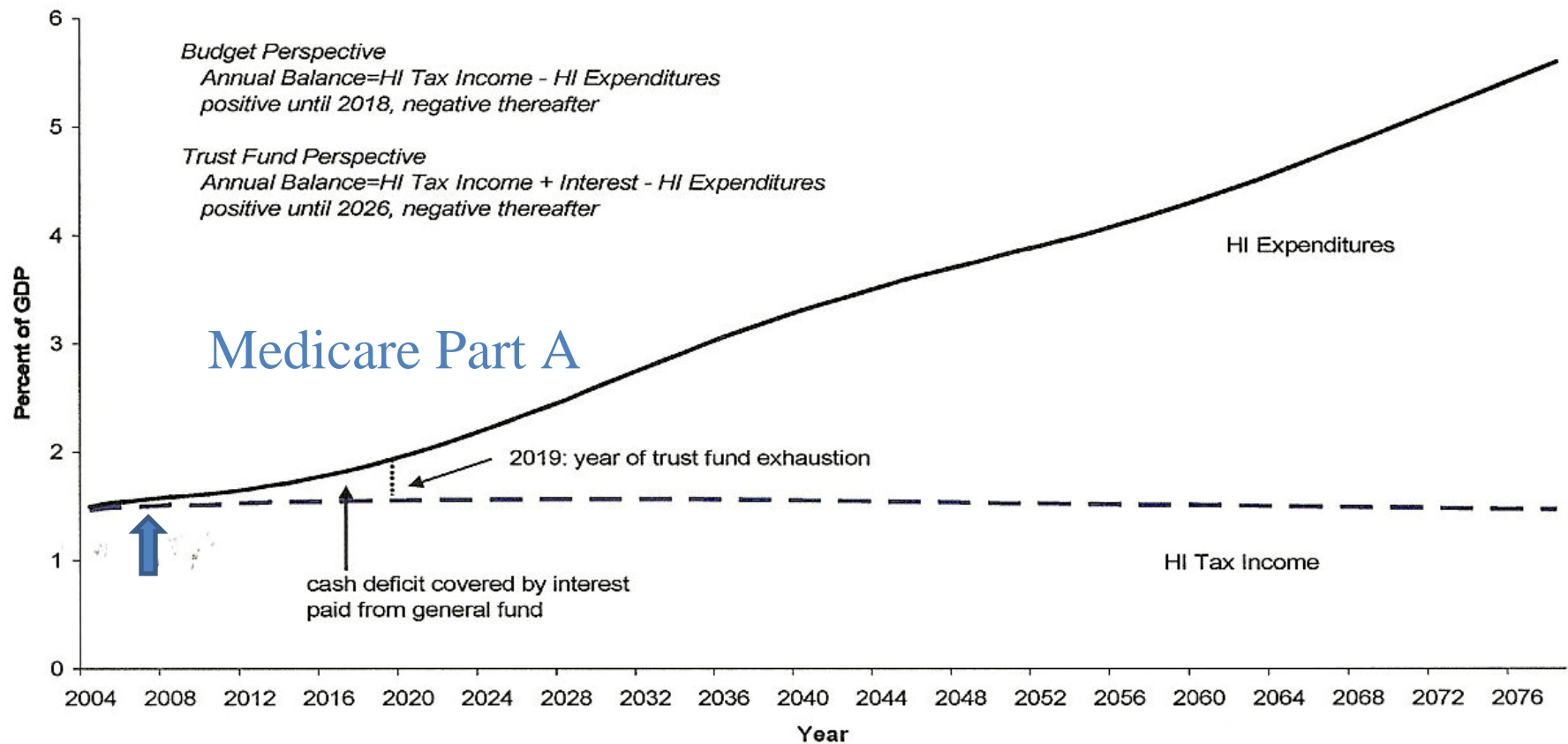
Spending future generations health
care resources today

Orr and Meilander 2004

...because of the Fall, human life is finite. All of us will die. Since that is inevitable, God expects us to care wisely for our own bodies and for those of our loved ones, and also for our resources. Health care professionals similarly must be wise stewards of their skills and services.

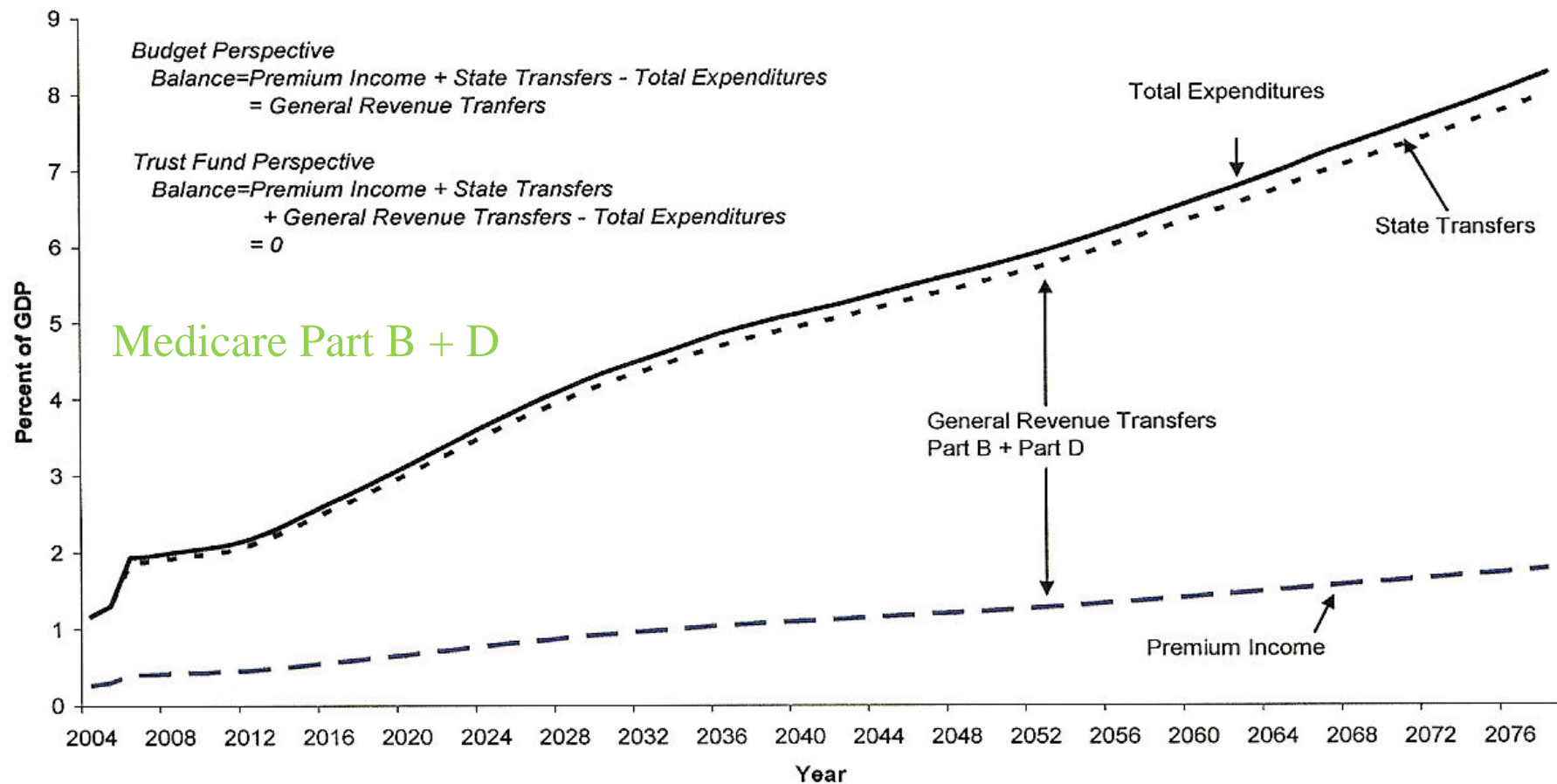
Taking into consideration the scriptural principle of stewardship and the tradition of proportionate treatment, I conclude that there must be some degree of discretion in use or non-use of feeding tubes

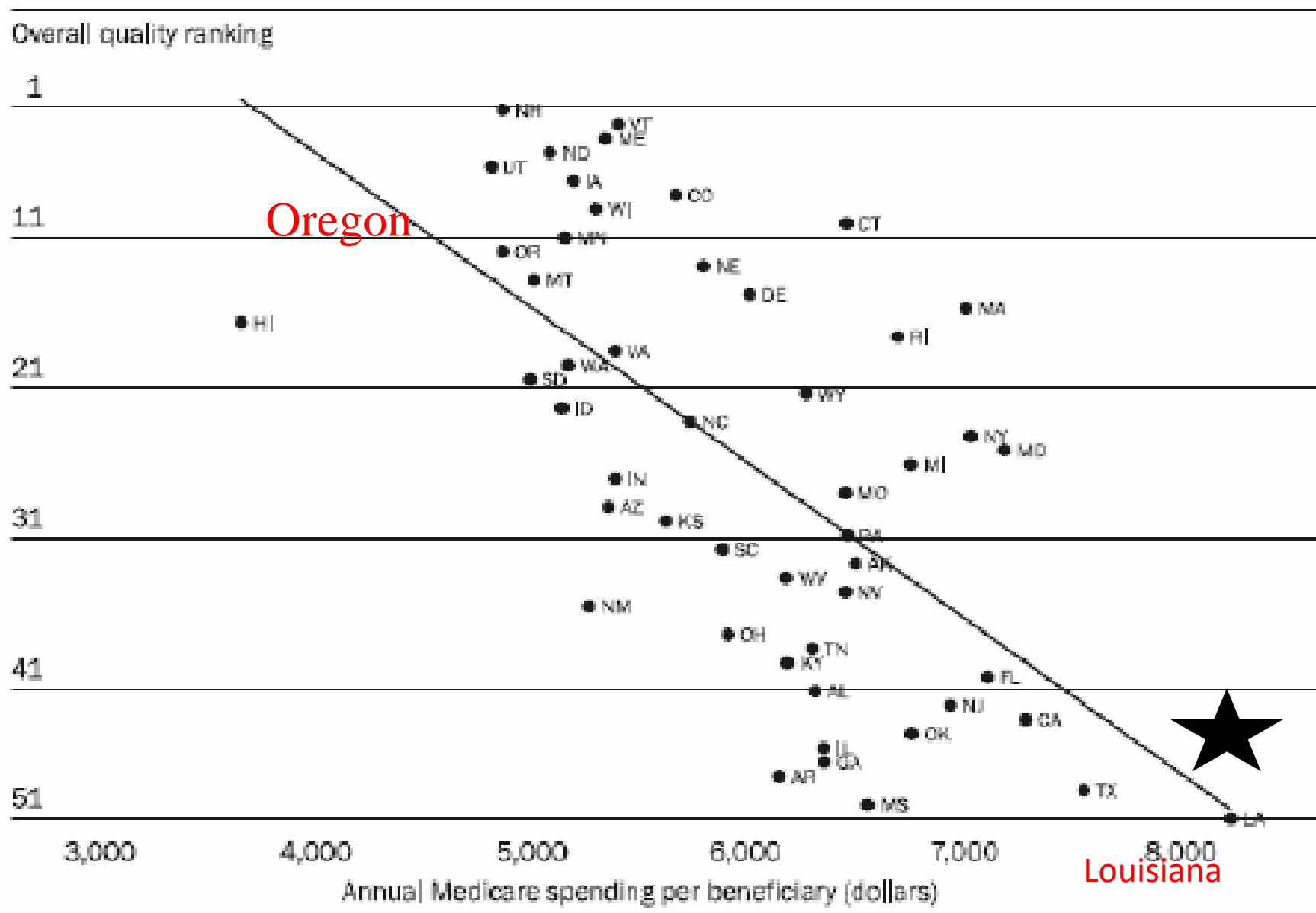
Budget and Trust Fund Perspectives
HI Tax Income and Expenditures, 2004-2078
(percent of GDP)



Projected Growth in Part B+D compared with premiums

Budget and Trust Fund Perspectives
SMI Income and Expenditures, 2004-2078
(percent of GDP)

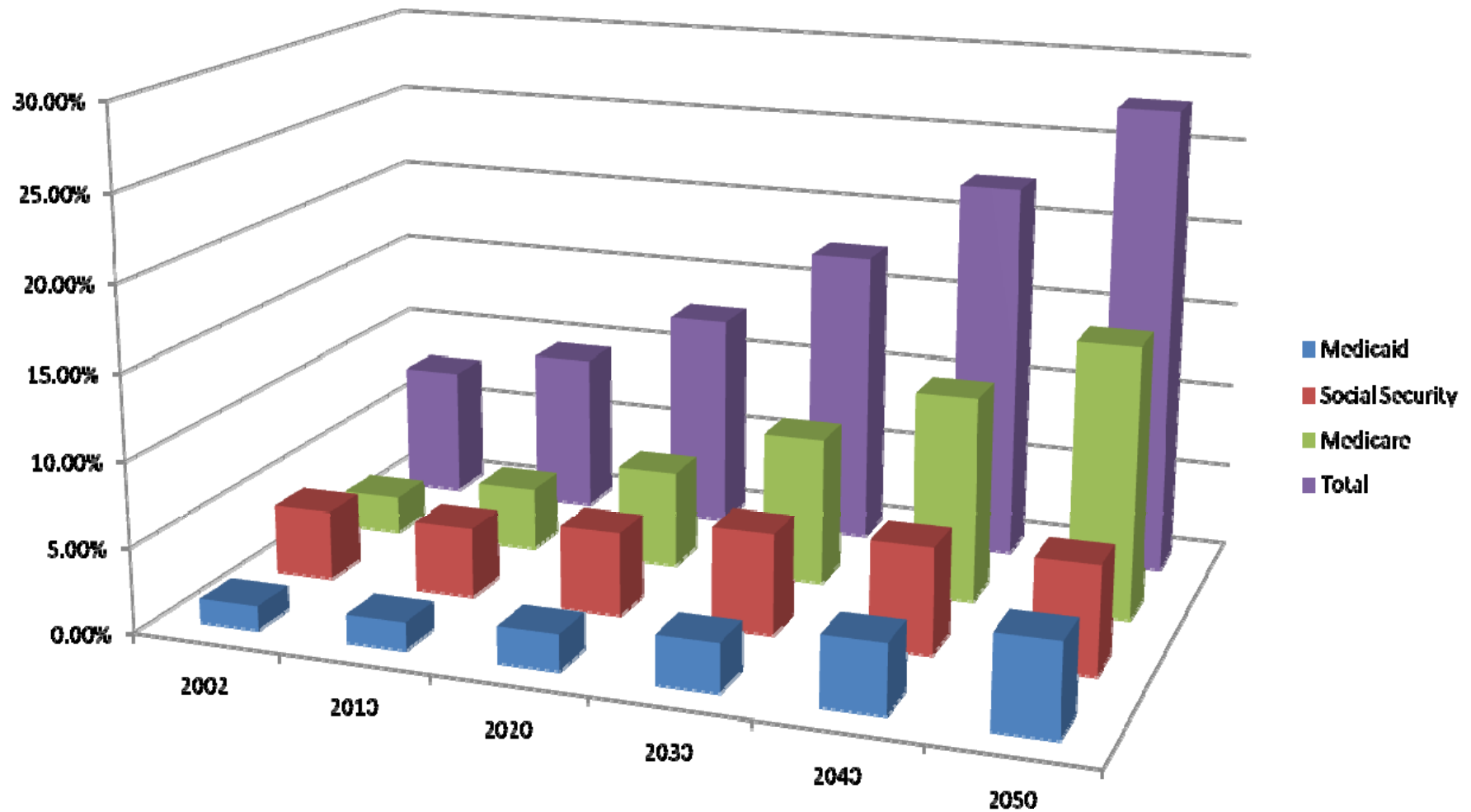




SOURCES: Medicare claims data; and S.F. Jencks et al., "Change in the Quality of Care Delivered to Medicare Beneficiaries, 1998–1999 to 2000–2001," *Journal of the American Medical Association* 289, no. 3 (2003): 305–312.

NOTE: For quality ranking, smaller values equal higher quality.

Projected Growth of Entitlements



Three Ethical Issues for Health Care Reform

Justice

Dignity

Stewardship

Three Ethical Issues in health care reform

- Justice: A decent minimal level of health care for all.
- Dignity: Encourage (rather than discourage) the disabled to do useful work.
- Stewardship: Consider the consequences for the future and eliminate wasteful aspects of our current system.