

HEALTH CARE CONSUMER

December

Newsletter of the Champaign County Health Care Consumers

1991



Grammy Award winning artist Bonnie Raitt joined with CCHCC in the fight against Medicaid discrimination.

HRC Defeats Motion to End Christie Investigation

On November 7, members of the Women's Health and Low-Income Access Task Forces won a major victory in the fight against Medicaid discrimination. In a surprise turn of events, the Champaign Human Relations Commission (HRC) voted 4-2 to move forward with its investigation of discriminatory practices at Christie Clinic.

The vote culminated more than three months of intense activity aimed at pressuring the HRC to finally begin an investigation it had approved in April, 1990. This latest action

essentially reaffirms the HRC's decision of 19 months ago to investigate charges brought to their attention by CCHCC, two local physicians, and five Medicaid recipients who were denied care. The charges included dumping of pregnant women, denial of appointments, and refusal to immunize children.

Nineteen months ago, the HRC directed the city's Human Relations Officer to investigate Christie's policy of denying care to Medicaid patients. This policy violates the city's Human Rights ordinance, prohibiting discrimination including, but not limited to, factors such as class, family responsibility, and source of income.

In order to avoid an investigation, Christie notified the city in May, 1990 that they would be willing to negotiate a settlement. Both Christie and the city requested that the settlement be based on the Carle Clinic Civil Rights Agreement, won by CCHCC in 1987.

Over the next 12 months, several drafts of the settlement agreement were exchanged and commented on by the various parties. Although the process was slow, we were always hopeful that the issue could be resolved, and that access for the poor could be protected. Those hopes waned when progress slowed to a standstill, and Christie continued to deny care to Medicaid recipients.

In August, 1991 the Women's Health Task Force returned to the HRC and demanded that the

Discrimination Case Gains Prominent Supporters

The issue of discrimination at Christie has attracted the attention of prominent national figures in recent weeks. As the issue heats up, members of our Women's Health Task Force have begun working to focus the national spotlight on the problems facing local Medicaid recipients.

In past weeks, members have met with Ms. Magazine editor Robin Morgan, who expressed shock and concern about the plight of Medicaid recipients, and offered to help get the story out to a larger audience.

Similarly, the Rev. Jesse Jackson asked to be briefed on the problem when he visited Champaign-Urbana. After learning of the problems at Christie from his staff in Washington,

Rev. Jackson set up a meeting with CCHCC leaders to discuss options for building support among key politicians.

Finally, musical artist Bonnie Raitt agreed to lend support to the Women's Health Task Force when contacted. For her recent concert at the Assembly Hall, Ms. Raitt asked CCHCC to set up a table in the lobby to generate support from fans. She also urged the audience to get involved and support our efforts. Meeting with members of the Task Force after the show, she signed a postcard to the mayor and city council.

We hope to build on these contacts and attract even further attention to the discriminatory policies against Medicaid recipients.

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U of I Senate Criticizes CarleCare

The Faculty Senate at the U of I has joined the call for CarleCare HMO to open up their advisory process for their members. On November 4, in a nearly unanimous vote, the UIUC Senate approved a resolution calling upon CarleCare: to release the names of the members of its advisory committee; to explain how they were appointed and their term of office; and to provide the minutes of those meetings for the past two years.

According to Norman Denzin, chair of the Senate's Faculty Benefits Committee, 48% of the faculty and staff at the UI who are in an HMO belong to CarleCare. "Access to the names and addresses of CarleCare Advisory Committee members is especially critical at the present time, because of problems involved in the state's payments of bills and medical claims, with long delays causing confusion," stated Denzin. "At the same time, rising HMO costs, physician turn-over, and co-payments make member access to this committee much more critical." The Faculty Senate joins the Urbana City Council, which passed a similar resolution in August.

In a related development, the Advisory Committee, often referred to as the "Stealth Advisory Committee," was the focus of a complaint filed with State of Illinois regulators by the Task Force. Filed with both the Department of Insurance and the Department of Public Health, the complaint calls on the state to assure that CarleCare's members have the opportunity to be involved in the decision making process, as mandated by state law.

The complaint comes after more than a year of attempts by the Task Force to work with CarleCare to resolve the status of their Advisory Committee. Last October, CCHCC uncovered a state mandate that all HMOs have a "mechanism to afford the enrollees an opportunity to participate in an advisory capacity in matters of policy and operation," and began a petition drive calling on local HMOs to release information about the committees they created to fulfill this requirement. Both HMOs were

presented with over 1,000 signatures of local HMO members.

In response, PersonalCare Executive Director Alan Mytty met with the Task Force, and eventually agreed to establish the Advisory Committee called for in their bylaws and publish the names of its members. CarleCare, however, has failed to respond to numerous requests.

The complaint focuses on the unresponsiveness of CarleCare. Specifically, CarleCare has tried to confuse the issue by claiming that their grievance committee, called the Patient Satisfaction Committee, serves the purpose of the Advisory Committee. State law requires HMO members to be involved in both processes, but those processes are not interchangeable. The main points of our complaint are:

- CarleCare has not put in operation the Health Maintenance Advisory Committee which they established in their bylaws to fulfill the requirement in Section 2-1(c)(2) of

the Illinois Health Maintenance Organization Act;

- The requirement of Section 2-1(c)(8) to have enrollee participation in resolution of grievances is separate and distinct from the membership advisory requirement in Section 2-1(c)(2);
- For the enrollee input mechanism to be effective, HMO members need to know it exists and who is representing their interests on the Advisory Committee.

The complaint procedure used by the state is a three step process. First, there is a fact-finding stage, which is followed by a determination of the merits of the complaint. The third step, upon finding that the complaint has merit, is to enforce a penalty on the guilty party. The state regulators are required to report what determination was made, and their decision. In the meantime, the Task Force will continue to build public support for an open advisory process at CarleCare.

Advisory Line Provides Medication Information

Adverse reactions to prescription medications threaten the ability of older Americans to maintain an independent living environment.

Studies have shown that up to 1/3 of hospital admissions, and 1/2 of nursing home admissions of elderly patients are associated with drug misuse or adverse reactions.

To combat this tragedy, the Senior Citizens' Task Force has a Medication Advisory Line. This line is to help seniors take an active role in their own health care, by learning more about the drugs they take. The project is part of the Task Force's PharmAid, which educates seniors about potential adverse reactions, and helps to lessen the financial burden of expensive drugs.

Seniors who call will be sent a packet of data about the drugs they

are taking. The data has been gathered from many sources, including consumer publications about prescription and over the counter medications.

The actual information will vary, but in general will cover topics like adverse reactions, effectiveness, and the conditions the drug is prescribed for. The Task Force will also distribute free Personal Medication Records to callers. These forms are for recording the drugs a senior is taking, and fit conveniently in a wallet or purse.

To learn more about the Medication Advisory Line, or for more information about your prescriptions, call 352-6533. And remember, learning more about your prescriptions now may keep you from becoming seriously ill later.



Local senior citizens receive advice about their medications from Walgreen's pharmacists. These 'brown bag' sessions are part of our PharmAid program to educate consumers about their medications.

Pharmaceutical Assistance Deadline - December 31

Senior citizens and disabled adults have only until December 31 to enroll in the Illinois Pharmaceutical Assistance Program if they want to avoid an annual \$80 registration fee. This change is one of several regressive cuts that threaten the well being of thousands of consumers.

The program, which began in 1985, pays for cardiovascular, arthritis, and diabetes medications for low- and moderate-income senior citizens. Part of the state's Circuit Breaker tax relief, it allowed senior citizens to waive their \$80 tax rebate in order to have the state pick up the costs of their medications. Sadly, cuts passed by the legislature threaten to hurt those who need it most:

- An annual limit of \$800 per recipient, hurting the sickest;
- A \$5 co-payment for all generic drugs, and brand name drugs that have no generic substitute;
- A \$10 co-payment for brand name drugs with generic substitutes; and
- Elimination of the \$80 tax rebate which covers sign-up costs for seniors who don't receive a property tax rebate.

The final change, which eliminates the \$80 Additional Tax Rebate for first time applicants, takes effect on January 1. In other words, people who receive a property tax rebate from

Circuit Breaker will have the option of deducting the \$80 fee for the Pharmaceutical Assistance Program. Unfortunately, seniors that are only eligible for the \$80 Additional Tax Rebate for motor fuel, sales, and utility taxes, will have to pay the \$80 out of pocket. This change hurts lower income seniors, who may not have the \$80 to enroll in the program each year.

These changes will further weaken a program already struggling to meet the needs of seniors. In Champaign County, only 4% of seniors take advantage of the program, even though some estimates indicate that ten times that number could benefit. Preliminary results of a survey, to be released later this year by CCHCC, indicate many seniors didn't know the program existed.

"These changes threaten to further reduce enrollment in a program that was already failing to meet the needs in our community," explains CCHCC staff member Kathryn Danyluk. "With the changes going into effect January 1, it's important that seniors enroll in this program before the cut off date. Under the new law, persons enrolled by December 31 will qualify for the \$80 rebate each year."

For more information, call Kathryn at CCHCC (352-6533).

CCHCC Briefs

Bake Sale Nets \$450

On October 12, CCHCC's Senior Citizens' Task Force raised nearly \$450 at their third annual bake sale.

The event, which took place at Lincoln Square Mall, was a smashing success. We want to thank the fifty seniors, board members, and staff that helped bake goods for the sale. Special thanks also goes out to our Bake Sale Committee, who put in many hours making phone calls and seeing that the event ran smoothly. Committee members were Myrtle Chatman, Kay Fiedler, Nettie Cook, Eddie Lee Carter, and Mary Lou Jones.

Although we raised far more than any other year, there were still some items left over, which were donated to the Champaign Children's Home. Once again, thanks to everyone, and we'll see you next year!

"Crisis" Airs on TV

"Crisis," a television program produced by Families USA, will be broadcast on Channel 8 on local Cablevision. The program, which summarizes the crisis in health care in America and the need for universal health care, will air December 3 at 8:30 PM and December 5 at 7:00 PM. The program includes a brief appearance by Imani Bazzell, CCHCC Board Chairperson, encouraging local consumers to get involved.

250 at Bingo Bash

Nearly 250 of the finest bingo players in central Illinois helped raise almost \$1,500 for CCHCC's Low Income Access Task Force at our 7th annual Halloween Bingo Bash on Monday, October 29. This year's exciting event was held at the Urbana Civic Center, and featured our director, Mike Doyle, as the evening's Bingo Caller. Prizes totaling \$2,250 were won by players over the course of the evening. Thanks to everyone who helped make this evening a success, including contributions by Eagle and Diana Food Stores, and Market Place Cinema.

Emergency Drive Crosses State, Nation

On October 10 a caravan of ambulances delivered more than three million "Health Care for All" ballots to Congress and the White House, all reading "Politicians Take Note: This is just a sample ballot, but I'm ready to use my ballot on Election Day..."

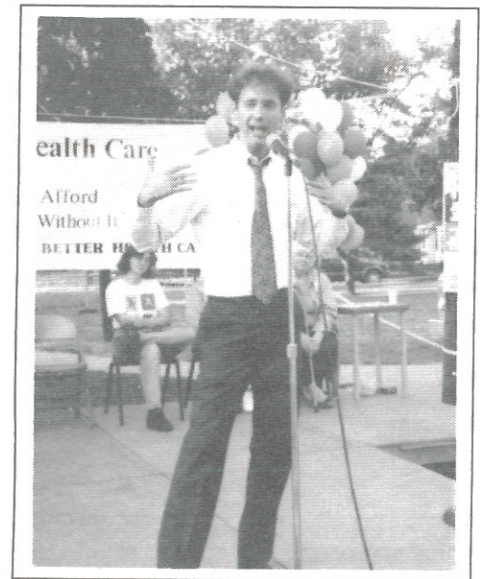
This was the finale of a 22 day, nationwide campaign to recruit support for universal health care legislation. During the 3 week span, twenty ambulances crisscrossed the nation, stopping in a hundred cities in all forty-eight contiguous states. The Emergency Drive was sponsored on the national level by Citizen Action, Families USA, and Jobs with Justice.

"We're here for the 100 million Americans who are uninsured or underinsured. We're here to support HR 300 ... and we hope that's why you're here, too," said Charlene Gieser, chairperson of ILGWU Local 593 (DuQuoin). Nearly 4,000 Illinoisans participated in the forty-seven events of the statewide Emergency Drive for Health Care, coordinated by the Campaign for Better Health Care. At Health Care Action Day II in Chicago, 1,200 consumers delivered the 100,000 ballots collected in Illinois.

Many of the Emergency Drive's participants were angry about our

current system. "You don't have the choices that you think you do as an American," said Susan Harris at an Emergency Drive event in Charleston. "You pay your premiums, you pay your co-payments, and then you fight for the coverage to which you're entitled." Our health insurance system keeps Charlie Mohr, president of both the Greater Madison County Federation of Labor and the International Association of Machinists Local 660 (East Alton), at work past retirement. "It hurts when

Continued on next page



Don Weiner speaks at a rally for universal health care. Weiner was one of the ambulance drivers in the Emergency Drive for Health Care.

Local Rally For Universal Health Plan

On September 28 nearly 150 people rallied for universal health care at Scott Park in Champaign. The rally, sponsored by the Health Care Consumers, was one of more than a hundred events organized by activists across the country as part of the Emergency Drive for Health Care (see story above).

Speakers at the rally told their own stories about the health care crisis, and urged support for a health care plan such as the federal Russo bill (HR 1300), which includes cost containment measures, and would cover all residents of the United States for all health care needs.

As a member of Physicians for National Health Care, Dr. Anne Robin spoke of the health care crisis from a physician's point of view. She also talked about her son, who is unable to obtain insurance because of a pre-existing condition, and the frustration that goes with the lack of accessibility to health services for those who need them most.

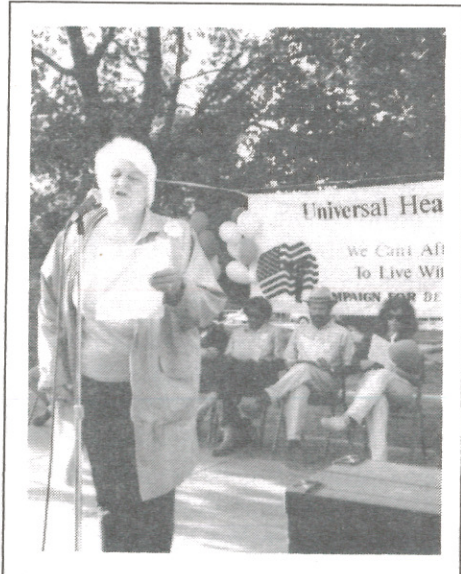
Gene Vanderport, from the Illinois Education Association, talked about the struggle of unions to deal with the current system. With costs rising at three times the rate of inflation, many businesses can't afford to keep up with the cost of providing health

coverage, and union leaders must sacrifice other benefits in order to keep health services for their membership.

Ceretha Cartwright, director of Frances Nelson Health Center, discussed the plight of low income residents of Champaign and the rest of the country. Many of the working poor do not have health coverage through their employers, and cannot afford to buy insurance on their own. As a result, they are often denied care and don't get preventive services.

As a former resident of Canada, Dannie Otto described the Canadian system, which the Russo bill is modeled after. "For five years my wife and I lived in Canada and experienced the health care enjoyed by all of the Canadian people. During our stay there, my wife was hospitalized several times, once for major surgery, and once for the birth of our son. I am here to tell you that the crude caricature of the Canadian system drawn by many opponents of health care reform in the United States is wrong!"

Other speakers were Miriam Marx, member of CCHCC's HMO Task Force; Hollis Glaser, CCHCC board member; Susanne Belovari, former resident of Austria; Helen



Dr. Barbara Atteberry Scott calls for a universal health care plan at the September 28 rally.

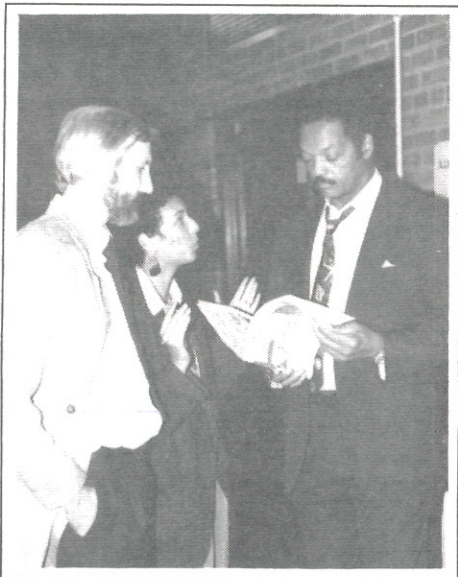
Emergency Drive

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you can't retire because health insurance payments cost you your entire pension," said Charlie. "Something has to be done, and it has to be done now."

Ambulances traveled the state from Cairo to Rockford, and from Danville to Quincy. "These ambulances symbolize the crisis of America's health care system: skyrocketing costs, declining benefits, small businesses that cannot afford coverage, and access for fewer and fewer Americans each day," said Robert Kilbury, Executive Director of the Southern Illinois Center for Independent Living in Carbondale.

The Emergency Drive for Health Care gathered support for health care reform. The campaign's participants are optimistic about the change. "We can have the best quality health care for all Americans, and pay less than we pay today," said Congressman Marty Russo, sponsor of HR 300, a plan which would create a single publicly funded health insurance plan to replace the hundreds of private insurance plans now in place. Dannie Otto, a farmer from Arcola who lived in Canada, talked of a system where everyone is in the same boat. "And do you know what?" he asked. "The boat can float."



CCHCC Chair Imani Bazzell briefs Rev. Jesse Jackson on Medicaid discrimination at Christie Clinic.



CCHCC Board Member Dorothy Utley expresses her sentiments to the Human Relations Commission.

Christie

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commission intervene to help speed the process. The HRC agreed, and established a committee to facilitate a meeting.

At that meeting, Christie shocked everyone by announcing they had no intention of signing an agreement. Christie CEO Robert Thompson said no one was going to tell Christie who to serve or how to run their clinic.

Hopes of ending discriminatory practices at Christie seemed remote, especially after the HRC failed to challenge Christie's decision to end negotiations. In response, CCHCC members attended the HRC's September meeting to demand they begin the long delayed investigation.

At that point, some commissioners and city staff began to back away from their previous positions. A multi-million dollar expansion project, announced by Christie a few weeks earlier, had received the wholehearted endorsement of city administrators, and some commissioners indicated privately that they felt Christie was too powerful to challenge.

The situation continued to deteriorate. At meetings held without CCHCC's knowledge or input, commissioners formulated excuses as to why the investigation couldn't and shouldn't move on. Four days before the October HRC meeting, Commissioner Ed Ryan announced to

the media that he believed the complaints against Christie had no legal standing, and that he would move to end the investigation, BEFORE IT EVER BEGAN.

Faced with an uphill fight, CCHCC and Medicaid recipients mobilized the community to save the investigation. Dozens of meetings were held with community leaders, HRC members, and the mayor. Attorneys provided legal advice to counter the city attorney's opinion that the case was invalid. Supporters attended HRC meetings to express outrage that the investigation might not take place. Postcards were sent to the mayor and city council, urging them to oppose city financing for Christie's expansion until the investigation was completed. New complaints charging discrimination were also filed.

Although the efforts paid off, and the HRC voted to move forward with an investigation into Christie, the fight to eliminate discrimination is far from over. To ensure that the rights and interests of Medicaid patients are adequately represented in the process, your help is urgently needed.

* Write the mayor/ city council to urge them to withhold city financing until the investigation is completed.

* Attend Women's Health Task Force meetings (1st & 3rd Thursday of each month, 5:30 PM, YWCA lounge, 1001 S. Wright, Champaign).

* Call Mary at CCHCC (352-6533) if you have encountered Medicaid discrimination or mistreatment.

\$17,000 Pledged

Volunteers Key Phone-A-Thon Success

Nearly \$17,000 in pledges were raised during our third annual Phone-A-Thon held in September. During the eight evenings of phone calls, nearly a hundred volunteers and staff members, and over twenty businesses helped to make this year's Phone-A-Thon our best ever.

We want to salute the volunteers and businesses who contributed their time and products to this year's Phone-A-Thon. One volunteer, Jamie Smith, commented on her experiences by saying "I had the pleasure and privilege of working as a volunteer for Health Care Consumers during September's Phone-A-Thon! I was only supposed to work two nights, but after the first night of the Phone-A-Thon I was so intrigued, pleased, enthusiastic, and interested in the program, that I volunteered my services for several nights. It was a truly very satisfactory experience, but lots of work. As a rule, people we called were very responsive."

Each evening, a different business provided meals for participants. In addition, each evening three prizes were awarded: one for most money pledged, one for the highest number of pledges, and one awarded to a person chosen at random from the evening's participants. Three phone callers attained the 500 Club, having raised \$500 or more in a single evening: Dr. Barbara Atteberry Scott

(\$527), Laure Kurre (\$511), and Jack Green (\$510). Several campus groups participated, including Zeta Tau Alpha, Alpha Phi Omega, and Alpha Sigma Phi. A \$100 contribution was made to the Association for Retarded Children on behalf of Zeta Tau Alpha for raising the most by a campus group (\$1084). The individual prize winners received free meals, books, and gift certificates from various community businesses.



Members of Zeta Tau Alpha were among the 100 volunteers that helped raise \$17,000 during our third annual Phone-A-Thon.

Special thanks to:

Huma Alavi	Regina Galer-Unti
Marty Apy	Jason Gascoyne
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Lisa Canar	Candis Kelly
Eddie Lee Carter	Mary Kelly
Lloyd Carter	David King
Wendy Carter	Brian Kirby
Christina Casaz	Dave Konsoer
Anne Casey-Elder	Laura Kurre
Myrtle Chatman	Cindy Kwit
Lena Choe	Nancy M. Lee
Jim Clark	Carol Lester
Jemima Cooper	Johnny Leuthold
Rob Corso	Angela Locke
Brian Crowhurst	Jann Lohman
Kathryn Danyluk	Jim Lorr
Kay Fiedler	Aimee Lorts
Lottie Foster	Angela Marsh
Bernice Franklin	Jay Matthews

Mary McDaniel
Carolyn McGee
Patricia McGinty
Bill & Susan McGrath
Dorothy Moeller
Ernest Moeller
Duane Moore
Aparna Parthasarathy
Esther Patt
Becky Pickett
Sheryl Plotkin
Ruth Reeter
Cora Reid
Dave Rein
Health Roach
Jessica Ryals
Bill Schlegl
Jennifer Schneider
Jamie Smith
Mamie Smith
John Soloman
Maria Somma
Jennifer Streitmatter
DeAnn Trucano
Joe Vasich
Clareta Walker
Sarah Wallbaum
Jenny Watson
Janus Wehmer
Frances Weir
Leonard Wirges

**Special thanks to businesses
that donated meals & prizes.**

**Aunt Sonya's
Bombay Bicycle Club
Bonanza
Burger King -W. Springfield
County Market
Elite Diner
Garcia's
Grandy's
Illini World
Jane Addams Bookstore
Jewel (Country Fair)
Jewel (E. Green)
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Kirby Foods
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Perkins Restaurant
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Pizza World
Red Herring Restaurant
Rogards
Subway
Village Inn Pizza**

Public Interest Fund Broadens Donor Choices

Skyrocketing health care costs, affordable housing, a deteriorating environment, equality under the law, and high utility rates concern all of us. The Public Interest Fund of Illinois, a coalition of nearly 20 public interest and social change organizations, has kicked off a campaign to make it easier to support groups that work on these important issues.

"Eight out of every ten private dollars to non-profit organizations come from concerned individuals," explained Mike Doyle of the Health Care Consumers. "Unfortunately, nonprofit organizations advocating for change are often excluded from receiving charitable contributions donated through payroll deductions."

The Public Interest Fund of Illinois was established to provide public interest groups in Illinois with a mechanism for participating in payroll deduction campaigns. Like the United Way, the Fund will raise most of its financial support through payroll deductions and distribute it among the participating organizations. However, that's where the similarities stop.

"Unlike most United Ways, we encourage the contributors to decide which organizations they want to support," explained Doyle. "Most of the groups in the Fund work at addressing the root cause of problems, and not just helping those individuals who are hurt by certain policies."

Initially, the Public Interest Fund of Illinois will focus its efforts on gaining

access to the State Employee Combined Appeal (SECA). To be eligible, the Fund needs to gather 4,000 signatures of state employees by early next year. Once the Fund qualifies for the state employee campaign, it is eligible to participate in payroll deductions campaigns at state universities and other workplaces in the public sector.

To date, eighteen organizations have joined the Fund, with several other groups seriously considering affiliation. In addition to the Health Care Consumers, four local groups have joined the Fund, including the Champaign-Urbana Tenant Union, the Community Recycling Center, the Illinois Center for Citizen Involvement, and WEFT. Other participating organizations are the American Friends Service Committee, the Anti-Defamation League, the Chicago Area Committee on Occupational Health and Safety, the Chicago Coalition for the Homeless, the Coalition for Citizens with Disabilities, the Coalition for New Priorities, Eighth Day Center for Justice, Illinois Public Action, Illinois State Council of Senior Citizens, Physicians for Social Responsibility, Southern Counties Action Movement, Statewide Housing Action Council, and Women United for a Better Chicago.

If you are a state employee, we need your help in gathering signatures. To join in this effort, please call John Gifford at the Health Care Consumers' office, 352-6533.



Local consumers 'cast their vote' for universal health care at Scott Park rally.

Rally

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Satterthwaite, State Representative, 103rd District; and Jim Duffett, director of the Campaign for Better Health Care.

After the speakers, two ambulances from the national Emergency Drive arrived to pick up the ballots collected at the rally and in the weeks before by the Health Care Consumers.

Don Weiner, who drove one of the pair of ambulances that came to the Champaign rally, said, "It's been an incredible journey. Everywhere we go, convenience store clerks, garage mechanics, millions of Americans have a story about the crisis in the health care system. We're all united in the lack of availability and affordability in health care."

The ambulances went on to a major rally in Chicago, and eventually converged with nineteen other ambulances in Washington, D.C. on October 10, where over three million ballots collected across the nation were presented to Congress.

The Health Care Consumers would like to thank all of the people who volunteered with the local Emergency Drive rally, and especially the Peppermill String Band, who played warm-up for the event. Special thanks also to our many speakers, and to Dr. Barbara Atteberry Scott for moderating.

CCHCC MEMBERSHIP FORM

(Please clip out and return with your membership dues.)

☐ Enclosed is my check
for \$_____

☐ Please bill my credit
card.

Membership Levels:

- \$50 - Friends of CCHCC
- \$36 - Family Membership/Adopt-A-Senior
- \$25 - Individual Membership
- \$15 - Senior Citizens/Students/Fixed Income

Check one: ☐ VISA ☐ MasterCard Expiration Date: ____/____/____

Account number: _____

Contributions to CCHCC are tax deductible.

Please return to: CCHCC, 44 E. Main, Suite 208, Champaign, IL 61820

Bush Veto Keeps 'Gag Rule' Alive

In a close vote, Congress failed to override President Bush's veto of legislation that would have prohibited the federal government from imposing a 'gag rule' on family planning clinics. The legislation was originally passed by Congress last summer, in an effort to reverse a Supreme Court decision.

On May 23, 1991 the U.S. Supreme Court ruled in Rust v. Sullivan that federally funded family planning clinics can no longer inform their patients of all legal and medical options when managing an unintended pregnancy. The ruling upheld the Reagan/Bush Administration's regulations, promulgated on Title X of the Public Health Services Act.

These rules state that health care workers in Title X projects cannot provide patients with information about the option of abortion -- even if a patient asks a direct question about abortion, and even if her health would be aggravated by a continued pregnancy. In effect, the physicians, nurses, and counselors in Title X clinics, like Planned Parenthood of East Central Illinois, would be 'gagged' from completely informing their patients of their pregnancy options.

At the inception of the Title X program more than 20 years ago, it was not anticipated that our nation's family planning program would become a tool for furthering an anti-choice political agenda. Congress enacted Title X in 1970 for the purpose of subsidizing the reproductive health care of low income women. Thanks to that forward-thinking act, 4.1 million poor women each year are provided with gynecological exams, contraceptives, treatment for sexually transmitted diseases, cancer screenings, sexuality education, and counseling. In east central Illinois, 14,500 women are served each year.

The public health benefits of providing preventive health care services may be immeasurable, but the financial benefits are not. Every dollar invested in Title X saves \$4.40 in health and welfare costs from

unwanted pregnancies. Most important, Title X prevents over half a million abortions every year by **preventing over a million unintended pregnancies**. However, if the Gag Rule is allowed to stand, the quality of the Title X program would be severely compromised.

The issue is not abortion. Title X has never funded abortions...

The issue is not abortion. Title X has never funded abortions, and many Title X clinics do not provide abortions. Rather, the issues are medical ethics, free speech of health care workers, and access to health care for low-income citizens. The implications of this decision in the practice of medicine are chilling, and undermine the belief that health care providers are charged with the responsibility of informing patients of all available options when dealing with any health condition, including pregnancy. When the government overrides the best judgement of the medical profession and censors the doctor/patient relationship, responsible standards of medical practice are in danger.

If these regulations are enforced, the inevitable transformation of our health care system will be deeply disturbing. These regulations would clearly establish a two-tier health care system, in which affluent women will receive complete information about their medical condition, and poor

women will receive a government-authored script of misinformation. It is our deep conviction that those who rely on the government for health care should expect the same quality care and honesty from their physicians that other consumers receive.

It is unclear what strategy family planning advocates will adopt in response to the failure of Congress to override President Bush's veto. In the past, agencies like Planned Parenthood have indicated that if Title X funds could no longer be used to provide quality medical care, they would be forced to re-evaluate their partnership with the federal government in providing health care for low-income women.

Here in east central Illinois, U.S. Representatives Terry Bruce and Richard Durbin voted against President Bush and the gag rule, while Representative Tom Ewing voted to censor medical advisors.

If Title X funds can no longer be used to provide quality medical services, agencies like Planned Parenthood will be forced to re-evaluate the partnership established with our federal government in providing health care for low-income women. In this time of crisis, Planned Parenthood of East Central Illinois renews commitment to accessible health care and reproductive options for women. Regardless of our success or failure in Congress, the best interests of health care consumers must remain the primary consideration of providers.

Champaign County
Health Care Consumers
44 East Main, Suite 208
Champaign, IL 61820

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