Spring

Newsletter of the Champaign County Health Care Consumers

1991

Over 1,000 Rally for **Universal Health Care**



CCHCC members were among the 1000 consumers who rallied in Springfield against Governor Edgar's health care cuts and for a universal health care plan.

Hotline Alerts State Medicaid Fraud Uncovered

Once again, CCHCC's Consumer Health Hotline has alerted state investigators to serious problems in the local delivery of dental care for public aid patients.

The problems first came to light in January, when the Hotline received the first in a series of calls concerning Dr. Charles Gorman. The caller had been trying to reach Dr. Gorman for

nearly a month, in order to get a set of dentures which Dr. Gorman had been preparing for her.

With persistence, the patient finally received her dentures in early March, but they were so large they wouldn't stay in her mouth. Unfortunately, this case proved to be just the tip of the iceberg.

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"Stop the Cuts -- Health Care for ALL" was the chant of over 1.000 Illinoisans attending Health Care Action Day in Springfield on April 23.

"We need to move forward, not backwards." exclaimed CCHCC Chairperson Imani Bazzell at a morning news conference to kick off the day's events. "Cutting people's health care benefits is a sick idea. We need a universal health care plan that provides comprehensive coverage for everyone, but contains the cost of health care by eliminating waste and inefficiency."

Bazzell was joined by two busloads of CCHCC members and more than 1000 other Illinois consumers who attended Health Care Action Day. The event provided a perfect opportunity for consumers to voice their support for universal health care, and their opposition to Governor Edgar's brutal budget cuts. Consumers from all over Illinois, including East St. Louis, Carbondale, Decatur, Danville, and Chicago, converged on the state capitol to meet with their elected officials.

At a morning briefing session, several speakers spoke about the need for a national health care system. There was great enthusiasm from the audience as the speakers emphasized that it will take "people power" to achieve this goal. Pledge

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CCHCC Conference Addresses Women and Health

"We have reduced women's health to simply the health of women," observed Norma Swenson, President of the Boston Women's Health Book Collective, and keynote speaker at CCHCC's 14th Annual Conference and Awards Dinner. "We need to remember that it isn't just women's health, but the relationship of women to health."

Swenson's comments, offered



Norma Swenson of the Boston Women's Health Book Collective was keynote speaker at CCHCC's Annual Conference.

during her acceptance of CCHCC's Consumer Leadership Award on behalf of the Collective, rang a responsive chord among those in attendance. Earlier in the day, over 300 women participated in 12 different workshops, covering all aspects of women's spiritual, mental, and physical health.

This year's conference was organized around the theme "Our Lives -- Our Choices: Women Defining Health and Healing." Many in attendance felt this year's conference was one of the most exciting in CCHCC's history. Part of the difference was a new approach CCHCC took in organizing this year's conference.

"We wanted to expand community participation and ownership of the event," explained CCHCC Chair Imani Bazzell. "When we decided to focus on women's health issues, the first thing we did was extend invitations to women's organizations from around the state to help with the planning and organizing of the conference. The response was overwhelming."

In all, nearly 40 organizations co-sponsored the conference with CCHCC. Speakers from around the state traveled to Champaign to address topics ranging from alternative healing methods and Medicaid discrimination to body image and reproductive services. But most important, the feedback from those in attendance was extremely positive. Reflecting the sentiments of many of the participants, one woman wrote "I salute CCHCC and each individual who contributed to the conception, birthing, and nurturing of this wonderful conference."

"It was really very exciting," explained CCHCC Executive Director Mike Doyle. "The enthusiasm and desire for an event of this type underscores the depth of feeling among women about health issues. The key now is to build on this enthusiasm in a way that can bring about the changes that are so

desperately needed. CCHCC is committed to following up with participants, so that this doesn't end up being a one day affair."

In that regard, Ms. Swenson offered some encouraging words. Noting that one of the main roles of

"The key now is to build on this enthusiasm... [to] bring about the changes that are so desperately needed"

the Collective is to keep track of the magnificent efforts that other women are making, Swenson complimented the conference organizers and predicted that this would be just the beginning.

As for CCHCC, Swenson offered the following observation: "It really feels like a family to me. This is a truly remarkable and inspiring organizing effort. Frankly, I've never seen anything like it."

If you would like to join with others to work on women's health issues, call Mary Kelly at CCHCC's office (352-6533).



Over 300 people attended CCHCC's Annual Conference which offered twelve workshops on Women and Health issues.



State Representative Tim Johnson (left) and State Senator Stan Weaver at a CCHCC forum on state employee health benefits. (See Story on page 6)

Annual Awards Dinner

The highlight of CCHCC's 14th annual Awards Dinner was the presentation of the Consumer Leadership Award to the Boston Women's Health Book Collective. Best known for its publications, which include Our Bodies, Ourselves and Ourselves and Our Children, the Collective has provided the breakthroughs needed for women's concerns to be recognized as legitimate health care issues. Accepting the award on behalf of the Collective was Norma Swenson, a Collective member for twenty years.

Donna Peterson and Cindy
Baute, both of Broadlands, received
the Harry Baker Community
Service Award for their efforts in
organizing a successful campaign to
have free immunization clinics for
the 1000+ children in rural southeast
Champaign County.

The Henrietta DeBoer
Volunteer of the Year Award was presented to two individuals for all the time and effort they have so generously provided to CCHCC. George Brackemyre is an active member of the Senior Citizens Task Force, and Margorie Booth is a Retired Senior Volunteer Program (RSVP) volunteer.

CCHCC's annual Provider of the Year Award was named after Dr. Elsie Field, who passed away earlier this year. The award was presented to Dr. Ann Robin, for the dedication she has demonstrated through her work at Planned Parenthood, the McKinley Health Center, and the Prairie Center.

The Special Recognition
Award for Volunteer Service was
presented to several University of
Illinois organizations for their
participation in the 1990
Phone-a-Thon. Sharing this year's
award were Alpha Sigma, Alpha Xi
Delta, Kappa Delta, and Delta
Gamma.

WILL-TV was presented the award for Excellence in Health
Care Reporting, for the broadcast of "Borderline Medicine," a special report on the health care crisis and the debate about a national health care system in the United States.
Senator Penny Severns was presented the Legislative
Achievement Award for her work on women's issues.

Finally, CCHCC's reknowned "Golden Bedpan" Award is presented each year to the persons or institutions responsible for the greatest disservice to health care consumers. This year's recipient was Governor Jim Edgar, for his recently proposed budget cuts (see story on page x). Governor Edgar was not in attendance to accept this award.

CCHCC salutes the 1991 award winners for their efforts and dedication.

CCHCC Briefs

Board Election Results

Election ballots for six at-large seats on CCHCC's Board of Directors were tabulated on March 15, and announced at CCHCC's annual Conference and Awards Dinner. For those of you who were unable to attend, here's a rundown of the results for six seats, as well as two additional vacancies created by the mid-term resignations of Anna Clayton and Vicky Hinton.

Six newly elected board members will join two veteran CCHCC members to fill the eight openings. The two veterans, Esther Patt and Judy Checker, will be joined by Gary Adelman, Lena Choe, William Creswell, Clare Harlow, Janus Wehmer, and Jean Weir.

In addition to welcoming our new board members, we want to thank outgoing board members Anna Clayton, Vicky Hinton, Ed Ramthun, Abdul El-Jamal, Anna Marie Gire, and Susan McGrath for their hard work and outstanding contributions to CCHCC.

Job Openings

CCHCC is currently hiring door-to-door canvassers to go out into the community to talk one on one with residents about health care issues (see story on page 5). In addition to their educational function, canvassers encourage area residents to join CCHCC and become active in the fight for a more responsive health care system. If you're interested in applying for a canvass position, call Julie Thomas at 352-6533.

CCHCC also is seeking persons interested in joining our staff as VISTA Volunteers. These full-time volunteers work with low-income consumers and receive a small monthly living stipend. For more information, call Mary Kelly at 352-6533.

Universal Plan Falls One Vote Short

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sheets indicating support for HB 300 and SB 300, which would establish a universal health care plan in Illinois, were passed out to group leaders while those in attendance were briefed on how to lobby their legislators.

Following the briefing, consumers met with their legislators individually to seek their support for HB 300/SB 300. Local Representative Helen Satterthwaite signed the pledge after meeting with CCHCC members. However, the contingent from Champaign was less impressed with Senator Weaver, who claimed he was "uninformed," and Rep. Tim Johnson, who didn't meet with his constituents despite several attempts. Unwilling to accept their response. CCHCC member Louise Perkins reflected the sentiments of everyone who made the trip. "We need to pressure these legislators, get them to say one way or the other if they support this bill. And if they don't, we need to find out why."

Following the meetings with elected officials, all 1000+ consumers gathered for a rally in the state Capitol Rotunda. At the rally, speakers representing numerous organizations sounded the battle cry: "No More Cuts -- Health Care for ALL." Senator Penny Severns, a co-sponsor of SB 300, received thunderous applause when she emphasized that "the time for national health care is now, and there is no time to wait."

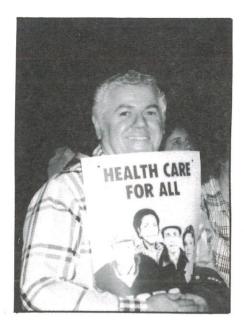
From the rally in the Rotunda, everyone marched up to Governor Edgar's office to drive home their opposition to his budget cuts. Amidst a thunderous chant of "Stop the Cuts -- Health Care for ALL," representatives from several organizations presented the Governor's staff with health care items that would no longer be provided to the poor if his budget cuts were enacted. These items included: eyeglasses, dentures, wheelchairs, crutches, pill containers for senior citizen medications, and much more.

The day climaxed at 2:00 PM, when the Illinois House Insurance Committee met to consider the fate of HB 300. As the hearing time drew closer, nearly 200 people packed the hearing room (which seats only 75), while hundreds more waited outside. As the committee members started arriving, many of their constituents approached them demanding their support for HB 300. As the temperature in the room soared over 80 degrees, so did the political heat on the politicians.

Before proceeding with the vote on HB 300, Chairman Mautino was presented with hundreds of witness slips, signed by people attending Health Care Action Day, stating their support for HB 300. As the roll call commenced, so did the political speeches as supporters urged its



Over 200 consumers packed the House Insurance Committee hearing on the Illinois Universal Health Care Plan as several hundred more waited outside. The proposal fell one vote short.



passage and opponents ducked for cover.

Pessimistic about the chances of passing HB 300 out of the Insurance Committee, which is dominated by friends of the insurance industry, supporters of universal health care were astounded as the vote proceeded. Legislators who had indicated they were neutral voted in favor, while others who had been solidly opposed felt compelled to vote present.

When the smoke had cleared, HB 300 fell just one vote short, with eleven committee members voting in favor (12 votes were needed), six voting against, two absent, and four voting present.

Supporters of HB 300 were both encouraged and surprised by the vote. Jim Duffett, Director of the Campaign for Better Health Care, which organized Health Care Action Day, said "The people who came here today had a direct impact on the votes in committee. We were expecting just 5 or 6 yes votes, but clearly the politicians got the message. The vote today will elevate the level of debate in Illinois about universal health care. It sends a message to other elected officials who are trying to read how this issue plays politically."

As the day came to an end, everyone was tired but satisfied that we all had put out a great effort. One bus rider stated, "It's great to be a part of something that will eventually make things better for all of us."



Legislative Update '89

In addition to HB 300 (the Illinois Universal Health Care Plan), which fell one vote short in the Illinois House Insurance Committee (see cover story), there are several additional legislative proposals that CCHCC has been following:

SPOUSAL IMPOVERISHMENT FOR IN-HOME CARE (HB 761)

HB 761 extends financial protections won last year by spouses of nursing home residents to those seniors who need in-home care in order to keep a disabled spouse at home. Currently, in order to qualify for Illinois' home care program, couples must reduce their assets to \$10,000 and sacrifice most income in excess of \$702 per month. Spouses of nursing home residents, on the other hand, may keep up to \$66,480 in assets and the first \$1,662 in monthly income. HB 371 expands home care eligibility so that it equals the nursing home Medicaid limits. Chief sponsors include State Representatives Jan

Schakowsky and Bob DeJaegher. Approved by the Illinois House.

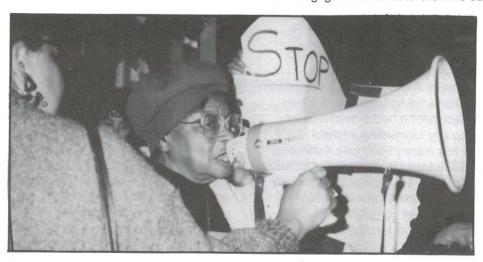
CIRCUIT BREAKER AND PHARMACEUTICAL ASSISTANCE CUTS

Governor Edgar has proposed cutting \$46 million from the Pharmaceutical Assistance Program and \$23 million from the Circuit Breaker Program. These cuts would be imposed by placing a \$400 cap on the pharmaceutical benefit and by eliminating the \$80 additional circuit breaker grant. They will hurt as many as 450,000 Illinois seniors with incomes of \$14,000 or less. Edgar's cuts are contained in SB 361, and are opposed by CCHCC.

COURT SECRECY (HB 276)

Legislation to restrict court secrecy orders, which sometimes conceal dangerous products, passed the House Judiciary I Committee and has moved to the House floor.

Passage of this crucial legislation, sponsored by Rep. John Matijevich (D-Waukegan), will protect consumers from negligent manufacturers who use



CCHCC Volunteer Edna Booker speaks out against cuts in the pharmacuetical assistance program in a rally at Governer Edgar's office.

court secrecy orders to hide information about product dangers from the public.

INSURANCE REFORM (HB 2184)

This bill, sponsored by State Rep. Louis Lang (D-Chicago), calls for repeal of the insurance industry's anti-trust exemptions, which would end insurers' ability to engage in collusion and price fixing. Passed out of committee, faces full vote in Illinois House.

BIRTH CENTERS (HB 488)

Legislation that would allow birth centers to be established in Illinois was introduced by Rep. Currie, and passed by the House Health Care Committee. Birth centers provide high quality care at a cost which is 40-60% less than the average hospital birth. Please call or write your state representatives today and encourage them to support HB 488.

FOOD TOXICS (HB 208)

Legislation sponsored by State Rep. Jan Schakowsky (D-Evanston) and House Speaker Michael Madigan to create the Food Toxic Disclosure Act was passed by the House Consumer Protection Committee. If passed and signed, this legislation will help alert consumers to the presence of carcinogenic and birth defect causing substances on or in their food products.

HMO REFORM (HB 980):

Introduced by Representative
Helen Satterthwaite, this bill would
require HMOs to make their consumer
involvement mechanisms, such as
Advisory Committees, public. The bill
would also require HMOs to provide
utilization data to employers and
tighten reporting requirements with the
Department of Insurance. The bill was
not voted on in the Insurance
Committee and has been placed on
Interim Study. Prospects of support
from the business community make
this bill a strong contender to be
passed next year.

HEALTH INSURANCE COST CONTROL (HB 2548):

Limits administrative overhead costs for private health insurance companies to five times the Medicare overhead rate. Failed to pass from the House Insurance Committee, but an attempt may be made to ammend this bill onto another on the floor during second readings.

State Employee Health Benefits

On Friday, April 19, State Representatives Helen Satterthwaite and Timothy Johnson joined State Senator Stanley Weaver at a CCHCC sponsored forum on state employee health care benefits.

The forum was originally intended to provide state employees with an opportunity to recommend changes in the state health benefits package, which expires June 30. But when the Governor's office confirmed reports earlier that week that he was seeking \$70 million in benefit cuts, the forum took on new meaning.

Throughout the forum, one employee after another expressed concern about the Governor's plan to cut benefits. Most shared the view of AFSCME organizer Ed Ramthun, who told the politicians that state and university employees and retirees should not be forced to pay \$70 million currently borne by the state. Ramthun testified, "The problem is not overly generous benefits ... it is lack of responsible funding by the state."

But the budget cuts weren't the only concern expressed. Janus Wehmer, a CCHCC Board member, spoke of her experience at the dentist the day before the forum. "I was shocked when they told me I needed to pay for my appointment because they [the dentist] couldn't wait until August to be paid. The same thing happened last year, so I made this appointment two months earlier in the year to avoid the situation."

Responding at the end of the forum, Rep. Johnson said the forum "opened my eyes and educated me to issues I haven't seen before." Rep. Satterthwaite stated that "the situation may get worse before it gets better," and "the problems of state employee health benefits are probably not the highest on our priority list." Senator Weaver echoed those sentiments, saying "All three of us have some major, difficult decisions to make."

CCHCC has joined with state employees in targeting Senator Weaver, who serves on the State Economic and Fiscal Commission, which must approve the health benefits package.

Canvass to Start

Once again, spring has come to east central Illinois. In addition to the flowers blooming, the spring rains. and the farmers planting the fields. spring also marks the beginning of the CCHCC door canvass. This is the eighth year of our community outreach and education campaign. which is so vital to the growth and development of CCHCC. The canvass goal for this year is to reach more people than ever before. topping last year's performance of reaching more than 10,000 households in over 20 communities in Champaign County.

CCHCC has been fortunate this year to have had a phone canvass to complement our traditional door canvass. Our phone canvass has been staffed by five dedicated callers: John Soloman, Amy Lorts, Tim Schollenberg, Allison Locie, and Andy Foland. These five have been spreading the word about CCHCC's issue campaigns to our members who were not home when the door canvass visited their neighborhood last summer.

Judging from the support given to the phone canvass (which far exceeded our expectations), 1991 promises to be an exciting and productive campaign for the door canvass as well. Anyone wishing to participate can call the CCHCC office at 352-6533. For those who don't want to canvass, but wish to continue their support for CCHCC, please be sure to renew your membership when our canvassers knock or call.

Medicaid Fraud

from page 1

Within just a few weeks in March, several calls came in to the Hotline from Medicaid patients of Dr. Gorman who had work in progress. Several of them were having dentures made, and one was in the middle of a root canal.

Department of Professional Regulations (DPR) and the Illinois State Dental Society. As a result, the DPR is currently conducting an investigation into Dr. Gorman's whereabouts, as well as his apparently unprofessional and fraudulent practices. As we go to press, the Hotline has also learned

When Hotline advocates visited the dentist's office, they found it abandoned... In at least seven cases, Dr. Gorman had already received payment from Medicaid for services not yet completed.

None of them had been able to contact Dr. Gorman.

When Hotline advocates visited the dentist's office, they found it abandoned. A call to the company that had leased the space to Dr. Gorman revealed that he had moved without leaving any forwarding address.

A few more phone calls confirmed CCHCC's worst fears. In at least seven cases, Dr. Gorman had already received payment from Medicaid for services not yet completed; an apparent case of Medicaid fraud.

Immediately upon learning this, CCHCC filed formal complaints with the Dental Unit of the state's

that the Illinois State Police have initiated their own investigation.

It is always unfortunate when a health care practitioner conducts his or her practice in a criminally negligent manner. The situation is doubly tragic when the patients are those least able to seek other options, as is the case with Medicaid dental care.

If the other dentists in our community would do their share in serving Medicaid recipients, it is unlikely that negligent practitioners would be able to stay in business. As it is, dentists like Dr. Gorman continue to exploit the poor at taxpayer's expense.

Edgar Targets Health Care for Cuts

If Governor Edgar's proposed FY'92 budget is any indication, the health care delivery system in Illinois is facing a shaky future.

In his first major initiative since taking office, the Governor's budget would devastate health care for the poor, significantly raise health care costs for state employees, and threaten the financial viability for many health care institutions that serve the poor. Overall, many vital programs are scheduled for elimination, while others face cuts that will seriously damage their effectiveness.

Programs for the Poor Targeted

Some of the most brutal aspects of the Governor's budget are aimed at the poorest segments of society. Specifically, the budget calls for the elimination of the General Assistance Medical Program, which serves 145,000 of the poorest Illinois residents, and the Aid to the Medically Indigent. In addition, the Governor seeks to drop Medicaid coverage for many services, such as dental care, optometric care, medical equipment (including wheelchairs and crutches), and both chiropractic and podiatric care.

Cuts in Provider Payments

In addition to eliminating services for the poor, the Edgar administration also announced numerous reductions in reimbursements to health care providers and programs. Among these cuts are an across-the-board 5%



reduction for all medical providers that serve Medicaid patients; a decrease in funding for hospitals with a disproportionate share of Medicaid patients; and elimination of the Quality Incentive Payment Program (QUIP) for long term care facilities. In addition, the Governor is seeking cuts in social service and mental health services that support local agencies, such as the Prairie Center, A Woman's Place, and many other vital human service agencies.

Cuts In Other Health Care Programs

Many other health care programs were also targeted for cuts under the Governor's proposal, including: a) medical care for persons with chronic renal disease; b) medical care for persons with hemophilia; c) medical care for persons needing organ transplants; d) the Pharmaceutical Assistance Program for low-income senior citizens; and e) the Comprehensive Health Insurance

Plan (CHIP), which was set up to provide health insurance for persons who are unable to purchase it because of a pre-existing condition.

State Employee Health Benefit Cuts

Finally, Edgar has announced that he wants to cut more than \$70 million in health benefits for state employees, which could translate into literally hundreds of dollars in higher deductibles and co-payments, as well as substantially lower coverage.

Governor Edgar's drastic cuts in health care for Illinois residents made him the unanimous choice for CCHCC's 1991 Golden Bedpan Award. More importantly, this seemingly endless number of health care cuts underscores the fundamental problems with our current health care system: costs are skyrocketing out of control, forcing government, employers, and consumers to eliminate basic health care coverage.

It is no accident that the vast number of budget cuts announced by Edgar are aimed at health care programs. Without fundamental reforms within our health care system, this most recent round of cuts is bound to be repeated many more times in the future. Unwilling to stand up to the 'special interests' opposed to a universal health care plan, politicians like Governor Edgar would rather pass higher health care costs on to the citizens of the state, through cuts in coverage and higher out-of-pocket expenses.

CCHCC MEMBERSHIP FORM

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

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	for	\$			
[]	Plea	ase	bill	my	credit
		С	ard		

Membership Levels:

\$50 - Friends of CCHCC

\$36 - Family Membership/Adopt-A-Senior

\$25 - Individual Membership

\$15 - Senior Citizens/Students/Fixed Income

Check one:	VISA		Maste	rCard	Expira	tion	Date:	 /	
Account number	:	_ _					_		

Contributions to CCHCC are tax deductible.

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

Rising Drug Prices: Bitter Medicine

by Ron Pollack Executive Director Families USA Foundation

Ever get the feeling you are paying a whole lot more for the same old medications?

Well, you are. We all are.

The Special Committee on Aging of the U.S. Senate found that, between 1981 and 1988, the price of prescription drugs shot up over three times as fast as prices in general. While the Consumer Price Index rose 28 percent, drug costs jumped a whopping 88 percent.

Your local pharmacist isn't getting rich on these price increases. The bulk of the new profits goes directly to the drug manufacturers. During the 1980s, drug companies' profits were much higher than those of other industries, and the profit gap is widening.

Drug companies try to justify the increase in drug spending by saying they need the money for research and development. But only 3% of new drugs introduced between 1981 and 1988 by the top drug companies were important breakthroughs. Eighty-four

PBS Starts Series on Health Care

CCHCC members and other local residents will have a new opportunity this summer to become more informed about the American health care system.

The Health Quarterly, a national documentary magazine program focusing on health care in America, will premiere on WILL-TV/Channel 12 at 7 PM on Wednesday, June 12. The first program addresses the crisis facing 60 million Americans who are without adequate health insurance. Subsequent programs will focus on the ongoing debate on Capitol Hill about a national health care system, the effect business and industry have on America's health care system, and a look at insurance discrimination against AIDS patients.

percent of the expensive new drugs are just substitutes for drugs already available. These "me too" drugs aren't medical improvements. The only thing they improve is the drug companies' profits.

To really get a perspective on how badly inflated American prescription drug prices are, just compare them with drug prices in other countries. Compare what the same drugs you might buy in Pennsylvania or California or Texas are selling for in Belgium or France or England.

Americans are overcharged

The well-respected Belgian
Consumers' Association surveyed the
1988 prices of 25 brand-name drugs
frequently prescribed in Europe and
the U.S. Its findings? Americans are
charged far more than what
Europeans pay for the exact same
prescription medications.

The Senate Committee priced out a "shopping basket" of prescription drugs. For every dollar that Greeks pay for these drugs, Spaniards pay \$1.05, the French pay \$1.27, Italians pay \$1.31, Belgians pay \$1.66, and Britons pay \$2.17. For the very same medicines, Americans are charged an exorbitant \$2.79.

An example of a drug whose price is greatly inflated in the United States is Lopressor, a beta blocker used to control blood pressure. Lopressor is made in the United States, and in 1988 the average U.S. price was \$34.10 for 50 tablets of 50 milligrams each. But in Europe, the average price was about half: \$19.80 for the same amount of Lopressor.

Higher prices for the same pill

Or look at Aldomet, which is also used to treat high blood pressure. Aldomet is made in Pennsylvania. An elderly resident of Harrisburg, Pennsylvania's capital, might have paid around \$25.30 (the U.S. average price) for 100 Aldomet 250mg tablets. This price is a shocking 40 percent higher than the average European price of \$18.00.

Americans pay from 15 percent more to twice as much for medicines such as Ceclor, an antibiotic, or DiaBeta, an anti-diabetes medicine, or Dyazide, a diuretic. American-owned pharmaceutical companies manufacture all these drugs.

The fact is, those drug companies are simply overcharging the American consumer, and senior citizens are getting the worst of it. Prescription medication for senior citizens is often a matter of life and death. Sometimes. consumers can save money by asking their doctor or druggist about generic substitutions. But many seniors just can't afford to fill their prescriptions on a regular basis. Some skip pills, taking their medicine less often than they should, a dangerous practice. Many other cut down on food, or turn the heat way down in order to pay for their medicine.

It is wrong that our parents should have to face hard choices like this. The big drug companies are making higher and higher profits, while the elderly cannot afford to buy the prescription drugs they need. For older Americans -- for all of us -- this is bitter medicine to swallow.

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

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Volunteer Spotlight

Much of CCHCC's work is accomplished through the efforts of volunteers. In this edition of Volunteer Spotlight, CCHCC Hotline Advocate Andrea DeVries reflects on her volunteer experience with CCHCC.

For the past few months, I have been working as a hotline volunteer for the Champaign County Health Care Consumers. I have found my job to be both rewarding and frustrating, challenging and fulfilling.

When we work with clients, I often feel that we are most useful as someone who will locate the right phone numbers, the proper address, the key person to contact. I have found advocacy essentially to be a task of working around the "red tape" of our health care system.

The callers themselves seem often to be looking, more than

anything else, for someone who will take the time to listen to their side of the story; someone who is willing to empathize with the difficulties that the client is experiencing. Most of the callers feel as if they have been running into brick walls and dead ends.

The people that I have worked with have experienced financial problems such as a family's inability to pay for high hospitalization costs, or access problems such as a woman's desire to see her medical records.

Since the caller is usually experiencing physical or emotional distress, the additional problems become all the more serious. Michele Werda, Hotline Coordinator, and I have both found that a caller usually has more than one complaint.

We start the case by trying to sort out the needs and goals of the client. While each step forward makes me feel immensely happy, I often wish we could do more, and that I could find more ways to help.

It is very clear that the less money a person has, the more difficult it is to work through the health care system. The inequalities in service for Medicaid and uninsured patients have become painfully obvious to me these past few months.

As a volunteer, I most wish that I could spend more time with the people I work with, and that we were able to accomplish more. I would encourage anyone who has patience and an ability to listen to people to volunteer. It has given me an insight into our health care system that I could never have learned in my classes as a university student.

Volunteer Opportunities

Are you interested in becoming more involved with CCHCC? It's fun and easy! Just call CCHCC Volunteer Coordinator Lynn Wolff at 352-6533 for information about volunteering and the types of volunteer opportunities available. Below are just a few of the ways you can participate:

COMPUTER PROGRAMMING:

Experienced individual needed to help with database maintenance. Special project which can be done at home. IBM compatible computer and experience with dBASE IV required.

MAILING COORDINATOR:

Reliable individual needed to call volunteers for bulk mailing projects. Needed about once a month. Reimbursement for calls made at home.

SENIOR TASK FORCE:

Great opportunity to work with individuals interested in senior health issues. Task force is currently working to enroll more seniors in pharmaceutical assistance program, researching prescription drug misuse, and creating a prescription drug education program for seniors. Task

force meets on the third Thursday of every month at 2:30 PM at the Stevick Center.

WOMEN'S HEALTH TASK FORCE:

Great opportunity to work with individuals interested in women's health issues. Task force is currently working on the development of a women's health network, as well as

proposals for a monthly women's health workshop, resource directory, and resource center. The task force is currently planning activities as a follow-up to this year's conference.

For more information on volunteer opportunities, call Lynn Wolff at 352-6533.



CCHCC Volunteer Erich Gerdts and CCHCC Board Member Dorothy Utley take a donut break while helping with a bulk mailing at CCHCC's office.

Conference Volunteers

CCHCC would like to thank everyone who volunteered to make our annual Conference and Awards Dinner a tremendous success. We couldn't have done it without you!

VOLUNTEERS:

Jenny Barrett Patricia Barrett Mark Baron Imani Bazzell Kathleen Bettis Jane Betts Marjorie Booth Mary E. Bower Jim Burk Jayne Burkhardt Richard Burkhardt Llovd Carter Jennifer Cartwright Julie Claussen Lynn Currie Kathryn Danyluk Clementine Dawn Andrea Devries Kit Donahue Vena Donaldson Sally Duncan Lenita Epinger Kay Fiedler

Beldon Fields Michael Gabriel Jason Gascovne Bill Gorrell Lovie Grady Clare Harlow Sandra Hermann Julius Hewitt Eugenia Hilligoss Vicky Hinton John Lee Johnson Deborah Kern Dave King Cyndy Lammert Joan Lathrap Alice Lee Xsu Hong Lui

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ZETA PHI BETA:

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Dinner Patrons

Each year, many of our low-income and senior citizen members, who could not otherwise afford to attend our annual Awards Dinner, are given the opportunity to attend through the generosity of dinner patrons. This year, dinner patron donations provided discounted or complimentary tickets to more than 80 people. We would like to thank the patrons who made it all possible.

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Open House Sponsors

Several local businesses donated food and gifts for CCHCC's Volunteer Open House during National Volunteer Week. We encourage our members to support these businesses whenever possible. A special thanks goes out to these businesses.

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