

Health Care Reform And Implications For The Latino Community

Presentation to the Gerontology Program, Universidad de Guadalajara

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The United States is in the middle of major debates around health care reform. These debates are about expanding health care coverage and reforming a system of medical care that is widely viewed as broken. The United States has developed over many decades a system of health care that relies heavily on a for-profit insurance model. This has led to widespread inefficiencies, profiteering, wide disparities in health status based in income, race and age and growing public disenchantment with a private sector model of health care. Latinos have a special stake in the outcome of these debates. Hispanics, those from Mexico, Central America and Puerto Rico as well as those who are undocumented, have the least access to this for profit, insurance system and rely heavily on public charity and governmental programs.

The United States has developed two major public health care programs: Medicare and Medicaid. Medicare provides health care to the elderly and disabled and Medicaid provides medical care to the very poor. These two publicly funded programs require major federal expenditures and are facing severe budget constraints; yet they are the foundation of a social safety net for those in need of health and medical care. Those who do not qualify for these two programs must either receive health care coverage through their employer or through individual insurance policies. Today, close to 45 million individuals under 65 years of age are without health care coverage and close to 75 million individual are without health care coverage at some point at some point during the year. And for those with health care insurance, they face higher costs, greater restrictions and the fear that their employer or the insurance company will deny coverage if they face an expensive illness or chronic condition. Ironically, providing health care is a lucrative business. For profit insurance companies and the pharmaceutical industries are two of the most profitable businesses in the USA. Thus, not surprisingly their priorities are profits over consumers and they are fiercely resistant to any health care reforms that diminish their special market advantages.

As of this moment, the United States congress has passed two versions of health care reform, one in the House of Representatives and the other in the U.S. Senate. Both will do much to address the inequities in health care and will, to a large extent, benefit Latinos who are legal resident or citizens of the U.S. For example, both bills will eliminate the ability of insurance companies to deny health care coverage because of a pre-existing condition. Both bills will require insurance companies to cover all persons and to end discrimination based on illness, age or employments. Both bills mandate that all Americans carry health insurance and public subsidies are provided for small businesses and low-income individuals. The United States Congress will debate these two bills in January and attempt to consolidate the bills and have a final vote by the end of January. We are all hopeful that a bill will pass. The United States remains the only industrialized nation that does not have basic health care as a universal right for all citizens. All major nations including Mexico have this as a fundamental right although, of course, actual coverage and quality of care will vary greatly among nations.

Of special relevance to Mexico is the political reality that the final passage of a health care reform bill may depend, in part, on debates around immigrants and undocumented individuals. Both bills restrict coverage to U.S. citizens and those that are lawful residents. The Hispanic congressional caucus is attempting to expand coverage to include undocumented persons and is threatening to withhold their votes. Yet, public sentiment, especially during our economic crisis, appears to be in favor of restricting coverage only to citizens and lawful residents. These debates are similar to those on abortion where conservative law members are restricting abortion rights in these two bills much to the consternation of women and those favoring freedom of choice.

Regardless of the debates around immigrants and abortion, a final passage of a bill is crucial. It will expand coverage and make health care a universal right. For many of us concerned about this issue, our goal is to modify and revise the bill in the coming years and to address the issues of immigration later. At the same time, President Obama is committed to introducing a major immigration reform bill later this year and one that will hopefully provide a "path to citizenship." That too will make it easier to ultimately provide health care coverage to all immigrants regardless of their citizenship status.

Health care reform will benefit the Hispanic community in many ways; from expanding health care coverage to increasing funding to community clinics and providing medical care to Hispanic families. And given the demographic realities that Latinos will become the largest U.S. minority population by 2030-2040. We all have a stake in the health care status of Latinos given that they will be our future work force. U.S. politics and public policy is quite complicated and difficult for other nations to understand. The United States operates in a democratic system that has evolved over two hundred years and relies on the principles of separation of powers and decentralized government. Thus it can take many years before we address fundamental problems and the compromises and negotiations to pass a bill through our congressional system can often lead to an imperfect product. Yet, these incremental approaches do allow for citizen input and in the final analysis, the United States does strive to serve its people. And we hope that health care reform will pass and that all of us, especially the Latino community, will finally achieve universal health care coverage.