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Seeking health care for all Health care

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Norma Winchester, a part-time waitress at the Hilton hotel in Pikesville, had health insurance until August. Then her hours were cut back, and she no longer qualified for coverage from her employer.

Winchester, who lives in Randallstown, checked out individual policies, making several phone calls and using the Internet, but "they were all more than \$100 a month - not something I could afford." Making up for her lost hours at the hotel, she takes child-care jobs through an agency, generally one or two days a week, but that work doesn't provide insurance, either.

2004 could be a decisive year for people like Norma Winchester - the roughly 690,000 Marylanders who don't have health insurance.

A group called Maryland Citizens' Health Initiative, chaired by Baltimore health chief Dr. Peter L. Beilenson, has been working for several years to develop and build support for a "health care for all" plan. More than 1,000 church, labor, community and business groups have endorsed the effort.

The group's plan was introduced in the legislature last year, but failed to develop much traction. However, since then, key political leaders have been talking about expanding coverage as rising health care costs and slow job growth have increased the problems of the uninsured.

The health initiative group says this is the year to pass a comprehensive plan. It is expected to begin a stepped-up public campaign tomorrow to build support.

Most of the uninsured in the state are adults - 540,000 of them. Over the past few years, the state has extended free or subsidized insurance to low- and moderate-income children, including Winchester's 10-year-old daughter.

And most of the uninsured, like Winchester, work or live with someone who works. Only 4 percent of the uninsured adults in Maryland live in a family with no working adult, according to a study released recently by the Maryland Health Care Commission.

The proposal by the Maryland Citizens' Health Initiative group seeks to expand free coverage for low-income adults, subsidize coverage for those with moderate incomes and require higher-income individuals to purchase coverage. It would be financed in theory by an increase in tobacco taxes and a payroll tax aimed at employers who do not offer health

coverage to their workers.

Lawmakers, however, will also consider two other plans with less ambitious sweep, at least in the short term, but with more certain political backing.

Nelson J. Sabatini, Maryland's health secretary, says the Ehrlich administration agrees with the goal of universal health coverage.

However, Sabatini says, the administration will concentrate on incremental reforms this year, while looking to close the state's deficit. In the future, he says, the administration will support a package of tax credits and tax penalties to encourage individuals without health insurance to buy coverage.

John Adams Hurson, the Montgomery County Democrat who chairs the House Health and Government Operations Committee, argues that the state can't currently afford to buy or subsidize insurance for all who need it. Rather, he's looking to shore up "safety net" programs, such as clinics that treat the uninsured.

While the uninsured can get primary treatment at clinics, a study last year in Baltimore by the Open Society Institute - the public interest and charitable group founded by billionaire George Soros - determined that the uninsured often have trouble getting access to specialized care and related services such as lab tests and prescriptions.

Norma Winchester says that if the state were to offer free or subsidized coverage, "I'd love to try it."

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