Governor hopeful over new Oregon health plan



SALEM (AP) — Gov. Barbara Roberts says she's optimistic the Oregon Legislature will find \$85 mil-

lion to launch Oregon's health care rationing plan despite concerns about funding and forcing employers to com-

ply.
"It is a commitment that we made to
the people of this state that we would
fund the Oregon health plan," the governor said in an interview. "We are not
willing to walk away from this."

Oregon received the Clinton administration's blessing earlier this year for its plan to extend Medicaid coverage to 120,000 poor people by limiting the services paid by the state.

Since then, however, there's been no agreement by the Legislature to raise taxes or fees to pay for the health plan at a time when other state programs are facing budget cuts from 1990's Measure 5.

House Majority Leader Greg Walden, R-Hood River, said resolution of the funding issue may be stalled by disagreement over the way employers will have to offer coverage to the uninsured. Walden said that once the state extends coverage to the initial 120,000 low-income people, that triggers a provision in the law requiring employers by July 1995 to provide the same package of benefits to 300,000 working people who now have no insurance.

Walden said Associated Oregon Industries and other business groups are worried because details of the 1995 employer mandate haven't been worked out yet.

"I, for one, am not ready to deal with funding the plan until we deal with these issues," Walden said. "We ought to solve these problems before launching the program."

The governor, who lobbied intensively for federal approval of the rationing plan, said the business groups are getting prematurely alarmed over the employer mandate.

Many of the details about the kind of insurance programs businesses will be required to offer and other elements of the program can be worked out in the interim period after the 1993 Legislature adjourns and in the early going of the 1995 session, she said.

"We need to focus on those things that are imminent right now and deal with the other issues over the longer term," Roberts said.

The Democratic governor has been having meetings with various lawmakers and interest groups to forge a consensus on how to pay for the rationing program.

Ideas being considered include an income tax surcharge, a cigarette tax increase, a special tax on health care providers and a boost in beer and wine taxes.

So far there's been no agreement on any funding mechanism, Roberts said.

"We hope that within the next 10 to 12 days we'll be able to talk publicly about where we are," Roberts said.

One of the players in the behind-thescenes talks is the Oregon Medical Association, representing the state's doctors.

James Carlson, a lobbyist for the OMA, said the group hopes the discussion over how — or whether — to pay for the health plan will be handled separately and not become part of the overall tax reform debate going on in the Legislature.

The House Revenue Committee is to begin work in the coming week on trying to fashion some sort of tax plan to send to voters. But there's no guarantee that the Legislature will agree to send anything to the ballot in November or anytime else.

Carlson said the OMA is worried that the health plan funding issue might become mired in a dead-end discussion of tax reform.

"There is no good reason why the Legislature can't put together a funding package for the health plan," Carlson said. "There is widespread public support for this. The only ingredient that's missing right now is the political will to do it."

Walden said House Republicans haven't decided yet whether to tackle health plan funding as a separate issue or as part of the broader tax overhaul discussion.

For her part, the governor said she just wants lawmakers to set aside \$85 million for the program before adjourning and that she's not that particular about how they go about doing it.

"Regardless of whether something goes on the ballot or something does not go on the ballot, we are looking at the options that will fund the Oregon health plan under either one of those scenarios," Roberts said.

Holy melanoma! Look at changes on moles

(AP) — Despite rainy spring weather, the sun will reappear in Oregon, and Dr. Neil Swanson wants people to be prepared. The first thing to do before applying suntan lotion is check moles for changes.

Early detection of malignant melanoma — the deadliest form of skin cancer — can mean a 95 percent chance of cure, said Swanson, director of skin surgery at Oregon Health Sciences University in Portland.

Failure to catch the disease before it penetrates deeper into the skin and spreads into other body systems means almost certain death, he said.

People worldwide have contracted the disease in increasing numbers during the past 40 years, he said, noting the rate has doubled during the past decade alone.

Swanson blames depletion of the earth's ozone layer and overexposure to the sun for the rapid increase in malignant melanomas.

About 30,000 people each year are diagnosed with the disease in the United States, and at least 6,000 people die each year, according to the American Cancer Society.

However, 95 percent of the more than 600,000 cases of skin cancer diagnosed nationally each year are less dangerous forms of the disease. Basal cell and squamous cell cancers attack the outer layers of skin but seldom spread to other parts

of the body or result in death.

In addition to avoiding overexposure to the sun, Swanson advises against use of sunlamps or tanning machines.

"Besides the health risk, the effect of sunbathing or other deep tanning is to destroy the skin." Swanson said. "People who insist on trying to maintain a deep tan will end up looking like prunes."

To help prevent skin cancer, doctors recommend the "A-B-C-D" check of moles.

Most normal moles appear round or oval and have sharply defined borders. They can be either flat or raised and appear evenly colored, usually tan, brown or black.

By contrast, potentially malignant moles develop: •Asymmetry. The mole doesn't match in shape or appearance from one side to the

 Border irregularity. The edges of the mole appear notched, ragged or blurred.

•Color variation. Pigmentation is uneven and may include a range of colors such as tan, brown, black, red, white or blueblack.

 Diameter. The mole is larger than six millimeters (about the diameter of a pencil eraser) or suddenly begins to grow and change.

Additional warning signs of malignant melanoma include moles that bleed, itch or develop a crusty surface, said Eugene dermatologist Cynthia Dreyer.

Bone donor gives card to patient

ROSEBURG (AP) — Bob Heaton got a birthday card from a woman he never met this year — the woman who saved his life.

Heaton received the woman's bone marrow in a transplant operation two years ago at Seattle's Swedish Hospital.

Heaton had been diagnosed with chronic myelogenous leukemia, a cancer that would have killed him unless a donor was found.



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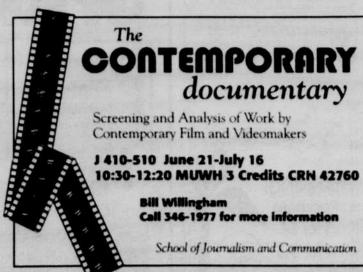


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