

To pay or not to pay

Oregon health plan or death plan? Whatever you call it, the Oregon Health Plan is stirring up controversy

by David Lane, Ph.D.

Some groups call it the Oregon Medicaid Demonstration Project; others the Oregon Health Plan. Still others call it the Oregon Death Plan. What is it? Why the controversy?

The Oregon Health Plan, if approved, is a combination of state Senate bills and federal waivers of current Medicaid requirements designed to increase the number of Oregonians covered by Medicaid. The plan mandates public assistance to *any* Oregonian who falls under the federal poverty limit. Consequently, the plan would extend benefits to an estimated 420,000 Oregonians who currently do not have any health insurance.

Coverage of treatment for a particular diagnosis is based on a prioritization list developed through 47 community hearings, 12 public meetings, and a phone survey of over 1000 people. Two of the most pressing health concerns of our community—treatment for the full spectrum of HIV disease (including dental services) and treatment for breast cancer—are covered by the plan.

Other components in the plan require small businesses to issue and renew insurance policies to their employees. In addition, the plan increases on insurance rates, allowing persons diagnosed with HIV disease to continue their affordable insurance coverage.

So far, it sounds pretty good. Over 20 organizations including Healthy Mothers, Healthy Babies and the Oregon Medical Association support the plan. There is support for the plan in the HIV community. Cascade AIDS Project (CAP) issued a statement saying the plan "represents a first step toward universal access to health care and [CAP] applauds the plan's emphasis on prevention and early therapy." CAP goes on to say that the "rational inclusion of dental services, hospice care, and ancillary services represents wonderful progress toward complete care of the whole person." So why have over 40 state and national organizations, such as Lambda Legal Defense and Education Fund, the AIDS Action Council, Vanguard (an Oregon HIV Patient Advocacy

Group), and the Radical Activist Truth Squad in Oregon opposed the plan?

The reasons for opposition are varied. One main concern lies with a line in the plan which gives a low priority to the treatment of "the very end-stage of HIV disease and cancer." Specifically, the term "end-stage" is not well-defined. CAP has urged that this line be removed, as it may "promote continued stigmatization of those with HIV disease." Bob Diprete of the Office of Medical Assistance Programs says that it is very important to note that treatment will be covered at all times for the infections resulting from HIV disease and cancer.

Diprete comments that this line reference to end-stage coverage of HIV means that heroic measures will not be covered. This would apply only when, in the opinion of the physician and with the understanding of the patient, further treatment of the underlying AIDS would not be effective. Heroic measures would not be covered. Just as important is that comfort care—whether the hospice or home care—will be covered even in this elusive "end-stage." There are, of course, other concerns. Dave Robison and Darrell Bilby of Vanguard state in a written response to CAP's position that the plan will "diminish the incentive for researchers and pharmaceutical companies to develop new drugs and therapies for HIV/AIDS disease." CAP acknowledges that the plan "will not fix every problem in the current medical system" and that careful monitoring of [the plan] is required to protect Oregonians." However, CAP's "Positive Connection" newsletter states that the plan "can represent an evolutionary step towards better health care for HIV infected people."

A decision regarding approval of the Medicaid waiver will be forthcoming. Sources of information about the plan are Bob Diprete and Lucy Lord-Lippincott at the Office of Medical Assistance Programs (378-5581 in Salem); Dr. David Lane, Oregon Health Division, (229-5792); Mimi Luther, Cascade AIDS Project (223-5907); and Vanguard (245-6799).

Community Center planning begins

Phoenix Rising Foundation is facilitating the process to create a lesbian and gay community center for the Portland metro area. Currently, Phoenix Rising volunteers are acting as ambassadors and inviting lesbian and gay groups to join in the process. The board of Phoenix Rising hopes that these groups will devise a joint plan to lease or buy space to build a community center.

The next meeting to discuss the community center will be on Monday, Feb. 24, 7pm at the Phoenix Rising office, 620 SW 5th, room 425. People interested in attending as individuals or representing a group should call 223-8299 for more information.

Phoenix Rising's commitments to the process include: offering meeting space for a committee of community center co-parents, secretarial services until the off-spring of the meetings is able to provide for itself, and creating a seed fund for the community center project.

The seed money will come from the "Phoenix Rising Friends Festival and Ball" in the Grand Ballroom of the Masonic Temple, Friday, Feb. 14 from 8:30pm to 12:30am. Profits after the first \$5,000 will go into a seed fund that will be held in trust for the community center.

The Friends Ball will showcase the talents of Howie Baggadonutz, Carol Steinel, and Bridges. Gail Dresner will teach ballroom dancing. The Waitrons will serve food, donated by local restaurants and caterers, with a song and a dance. Rubicon will perform music from the 40s through the 80s. Dance tapes donated by local DJs will fill in during breaks.



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