"Mr. Health Care" Steps Up His Advocacy

BY PROFESSOR MCKINLEY BURT

The Portland Observer takes this opportunity to remind readers that our congressman, Ron Wyden, has long been a staunch and effective supporter of better health care for all Americans. - and, particularly, he has shown an intense interest in related problems within our Northeast Community.

Consistently, Mr. Wyden has successfully introduced critical legislation that addressed the medical problems of those Americans who have been shamefully neglected within the present structure of our health delivery system. Many of us have been thoroughly impressed, not only by reports in the print media, but by viewing his performances on television as he conducted related hearings in Washington.

The following will provide you an overview of Congressman Wyden's interests and activities. This outline is from his 1990 presentation to the "North/ Northeast Economic Development Task Force' (His office is a always interested in the viewpoints of this community: Lloyd 500 Bldg., 500 N.E. Multnomah, Portland, OR 97232. The war against infant mortality is being lost. It's being lost because we are not reaching the mothers and children at

2. It's being lost because federal commitment to the kinds of programs which help low-income women and kids have been sacrificed over the last 10 years.

3. We are reaping the seeds of neglect and inadequate funding which have been sown over the last 10 years.

4. The United States has slipped to being 19th in infant mortality, from being ranked 3rd in 1950.

5. Over 40,000 babies will die this year before they reach their first birthday. 40 to 60 percent of them could have been prevented if their mothers

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had been provided with adequate prenatal care.

6. Infant mortality disproportionately strikes minorities and the poor. The rate of infant mortality for blacks in the U.S. is twice as high as for

7. For a country which spends over \$600 billion annually on health care, these statistics are inexcusable. Rich people can get liposuction while thousands of pregnant women don't see a physician until it's time to go to the emergency room.

II. The Solution:

1. Prevention is the key. Good prenatal care reduces the number of palsy, mental retardation, and epilepsy.

-The Institute of Medicine estimates that for each dollar spent on prenatal care, \$3.38 is saved on future medical costs.

-Just \$400 in prenatal care can make the difference between a normal, healthy baby and a baby who needs hundreds of thousands of dollars of medical care.

2. Family planning. There are too many women not using contraceptives. As a result, over 470,000 children are born each year to teenage mothers.

-Our teenage bithrate is higher than any other industrialized country.

Teen mothers are far more likely to have premature or low-birthweight

The federal government should provide adequate funding of programs such as Title X.

3. Access to providers. We need to encourage physicians and other health care providers to accept Medicaid patients., Today, Meidcaid only pays about 59% of a physicians's customary fees.

-Congress just passed mandatory expansion of Medicaid coverage to pregnant women and kids up to 133 percent of federal poverty; will try to increase such coverage to 185 percent this year (you are original cosponsor of Waxman bill to do so)

-The proposal by Senator Kitzhaber to reform Medicaid would help to boost provider payments in order to increase access for poor people.

-Access is not just an issue of the number of participating physicians. It is also an issue of physical access to a medical facility. Low-income women often cannot afford to pay for transportation to and from the hospital or doc-

-I would like to see a some federal funds used to provide for a "Well Baby on Wheels" program whereby physicians and/or nurses could make house calls to low-income women for prena-

4. Alcohol/Drug Abuse. The number of children born to drug or alcoholaddicted mothers has reached epidemic

-"Crack babies" are common boarders in our public hospitals.

-These children are generally premature and suffer from chronic health problems which can cost \$100,000 per

-That's why it is so important to invest the kind of resources that provide preventive health care, counseling, and substance abuse treatment rather than waiting to provide costly "rescue" treatment later.

-There's currently a 4 1/2 year waiting list in Oregon for low income substance abuse treatment programs. 5. Adequate Nutrition

-advocate increased funding for programs such as food stamps and WIC. 6. Adequate Access to Health In-

-Over 9.5 million women of childbearing age have no health insurance; another 5 million have insurance that doesn't cover maternity care

-national health insurance/ Kitzhaber plan will help.

Memory Loss Program Slated In Gresham

Are you concerned about memory loss or forgetfulness? Do you worry about a friend or relative who is showing signs of Alzheimer's Disease?

'Forgetfulness or Alzheimer's Disease: Learning the difference" will be offered June 13, from 7-9pm at St. Aidan's Episcopal Parish, 17405 N.E. Glisan, Gresham.

This free program, led by Ken Erickson, M.D., a memory expert at Good Samaritan Hospital & Center and Liz McKinney, executive director of the Alzheimer's Association, will cover the following topics. Causes of memory loss and forgetfulness; Alzheimer's Disease, current treatments and the latest research; and option for coping and caregiving.

The memory loss program, Cosponsored by St. Aidans Episcopal Parish and Good Samartian Family Support Center, is a kick-off for St. Aidan's Place, the new Alzheimer's adult daycare center.

For more information or to preregister please call the Family Support Center office, 229-7348.

Free Health Screening Offered

The hospitals and health care organizations of LEGACY HEALTH SYSTEM invite area seniors (age 55+) to attend a FREE HEALTH SCREEN-ING. The screening provides numerous important health tests and services, including: blood test (cholesterol, blood sugar, and others), general physical assessment by nurses, blood pressure, dental and oral cancer check, vision and glaucoma check, hearing test, lung health check, nutrition counselling, breast cancer self-examination instructions, colorectal cancer screening, and others.

For those desiring the full blood test, it is suggested you arrive in a fasting state - no food or drink (except water and medications) for the previous 12 dours. Known diabetics should follow their regular eating schedule.

Screenings are conducted weekly at different locations throughout the Portland Metropolitan area. Please call Winetta Soderlind, R.N. at 241-3478 to obtain a schedule of screening dates and locations.

PSU'S Spring Commencement Time Moved Up to Noon

Due to the possibility of a National Basketball Association playoff game being held Friday, June 7, at Memorial Coliseum, Portland State University has had to change the time of its Spring Commencement ceremonies. PSU's Spring Commencement now is scheduled for NOON, Friday, June 7, at Memorial Coliseum. Participants need to be at the Coliseum by 11 a.m.

Regardless of the outcome of the basketball playoffs, this time change is firm!

Because the Coliseum may need to be set up for the Blazers, the Coliseum management is allowing PSU use of the Blazer replay screens during the Commencement ceremony, allowing relatives and friends a close-up look at diploma recipients.

For those taking final exams immediately prior to commencement, vans will be available to help students reach the Coliseum in time for the ceremony. Caps and gowns may be picked up on campus June 4-6, from 8 a.m. to 5 p.m. in room 329 of Smith Memorial Center, or at the Coliseum on Friday, June 7, at 11 a.m.

PSU's Spring Commencement is normally attended by approximatley 1400 graduates and 9,000 spectators. To what extent the change in time will affect those figures is not yet known.

For more information, contact University Special Events at 725-4910.

Kaiser Permanente Seeks State Certification

Kaiser Permanente has decided to seek certification from the state of Oregon as a managed care organization (MCO). By seeking certification, the health maintenance organization hopes to better meet the needs of its employer groups and members.

"Our primary intent is to be more responsive and flexible in providing for the occupational health needs of our groups and members, according to Kaiser Permanente's Health Plan Manager Denise Honzel.

By gaining certification, Honzel says she hopes to be responsive to employers and unions and lessen confusion among some of the health plan's members who may have been unsure whether they could continue to see their Kaiser Permanente physician for treatment of work-related injuries and ill-

Employers and unions have become increasingly concerned about rising health care costs in Oregon. They are looking for ways to manage the costs associated with work-related injuries and illnesses. Legislation enacted last year authorizing creation of managed care organization was one attempt to address these needs.

Honzel says Kaiser Permanente has been studying the legislation on MCOs and the regulations implementing it. "Over the past several months, a number of our employer groups have encouraged us to become certified as a managed care organization. By taking this action, we hope to meet the needs of those employers who want to contract only with certified MCOs. In addition, we'll continue to serve our members whose employers haven't contracted with us as an MCO," sats Honzel.

'We have filed a letter of intent, and will work closely with the certification process," says Honzel.

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Free Advice Line Offered For Mental Health Questions

Portland-area residents can get answers to their mental health questions when the Emilie Gamelin Institute for Mental Health and Addictions Treatment Services sponsors "Advice Line," a one-day telephone call-in information line on Saturday, May 18.

Persons may call 230-6133 from 10:00 am to 4:00 pm and Institute affiliated child and adolescent psychiatrists, adult psychiatrists, mental health nurses and therapists will help with callers' concerns on mental health related topics. The Institute's Advice Line is not a crisis line but rather a source of information, education and guidance.

"With the pressures and stresses on today's families, we believe that parents and other adults often need a credible source of advice and consultation on issues concerning children, work, family and aging parents but may not know who to contact. Through our telephone information line, we intend to help callers with their questions and concerns and, if necessary, make appropriate referrals for further assistance," explains Eugene Borkan, M.D., Acting Executive Director of the Institute.

Since May is National Mental

Health Awareness Month we decided to sponsor this telephone information line as a way of extending the services of our Institute staff to a broad range of the community," Dr. Borkan contin-

Callers may access the line by calling the Institute at 230-6133. They will be asked if their question concerns children, adults or the elderly. Calls will then be transferred to an appropriate physician or staff member.

Both callers and the person answering the call may remain anonymous. However, callers may leave their names if they wish to receive printed information from the Institute about their particular area of concern.

Some of the types of calls Institute staff anticipate receiving include issues surrounding child and adolescent behavior, depression, and aging par-

"Many people are still reluctant to seek help for troubling issues. That's why we're providing Advice Line-it's an avenue for the community to ask question of physicians and other health care workers who are mental health specialists."

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