

# Health Care for the Poor: The Clinton Plan

*Interview with Dr. Tolbert Small*

**Dr. SMALL:** The situation in Oakland is similar to the one in the United States. We have 38 million people with no health insurance. We have a large amount of people who are under-insured. In the Oakland area we have six hospitals that have folded for financial reasons, San Leandro Memorial Hospital, Providence Hospital, Peralta hospital, Oakland Hospital, Merritt Hospital, Brookdale Hospital, now a small hospital in Richmond has become a psychiatric hospital. I think it is called Doctors Hospital or Sutter Hospital.

Yet the insurance companies are doing quite well. At one time, Blue Cross of California was bragging that they were sitting on a billion dollars. We see the chief executive officer of HEALTHNET on television saying "save the whales." What the CEO of HEALTHNET has failed to mention is that he and his colleagues have taken a \$30,000 investment and are going to make 100 million on stock profit and HEALTHNET.

When HEALTHNET became non-profit and private, they got 50 percent of the stock. He himself has taken a \$15 thousand investment and he is going to make \$30

million on it. This money should be going to provide health care.

So what we have is a savings and loan type mentality running the insurance companies that control health care in the United States and there's kind of sleaze-bag influence in the way the insurance companies run health care in the United States.

First, let me give an example, 25 percent roughly of every health care dollar goes for administration by the insurance company. They say over 14 percent of the Gross National Product (GNP) of the U.S. goes to health care. In Canada 9 percent (GNP) goes to health care. So, in other words, 3.5 percent of our GNP is going to the insurance companies just to administer health care.

President Clinton represents a lot of these people. AETNA insurance was a large donor to the Democratic Convention. Clinton represents the insurance people. The insurance people's lobbyists, probably have about 30-40 percent of the people in Congress. The majority of the American people, 66-70 percent, have said they would like to have a Single-Payer system which

would eliminate the 25 percent, money that insurance companies are getting for administering the health care system. However, Clinton does not have the willpower to buck the politicians and insurance people on that issue. That's why he has come up with managed care which will leave the insurance companies completely intact, to take their 25 percent cut of the pie off the top. They are part of the problem. It is like having a fox guard the hen house because the insurance companies are the ones who state, "if you have a pre-existing problem we will not insure you."

**COMMEMORATOR:** But Clinton has guaranteed that if you

have a pre-existing problem you will not be turned away. Does that mean anything?

**Dr. SMALL:** Well, with his plan, he says he is going to eliminate that problem with the insurance companies, so he claims. Supposedly, they will not be able to cherry pick and only pick healthy people.

They will have to pick everyone, but the fact of the matter is, he is talking about taking money from Medicare and Medi-Cal (California's form of Medicaid program) to insure 38 million Americans who have no insurance, when Medicare is constantly being cut and underfunded, instead of going after 25

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## Dr. Tolbert Small: The People's Physician

Dr. Tolbert J. Small provided medical service to the Black Panther Party for four years, served as Medical Director for Peoples' Sickle Cell Anemia Foundation for three years. He is a primary care physician and graduate of Highland General Hospital Internal Medicine Program. He has been best described as exemplifying the outlook of a primary care physician dedicated to serving the underserved and minority community.

Dr. Small was born in Mississippi and states his inspiration and drive to give back to his community came from his family. He is married to Anola Price Small and has three children who attended the Oakland Public Schools. Dr. Small has always been a community activist. As a medical student, he established a non-violent student program committed to registering voters, when voting was routinely denied to millions of Americans. Later, Dr. Small became involved in working with free medical clinics serving the poor and minority community.

In 1968, Dr. Small graduated from medical school at Wayne State University, Detroit, Michigan. From 1968 to 1970, Dr. Small completed both his internship and residency at Highland Hospital. In 1975, he completed a second year residency in Internal Medicine; and from 1975 to 1976 completed a third year as Chief Medical Resident. Dr. Small is Board Certified in Internal Medicine and he served as volunteer faculty in Highland's Department of Internal Medicine.

Dr. Small's area of medical practice for the past twenty years has been with the medically underserved. He practiced at West Oakland Health Center for three years; served as a physician for three years at the Berkeley Free Clinic, worked as a part time emergency room physician at Highland for two years; and taught as Assistant Clinical Professor, University of California, San Francisco, Department of Medicine for six years.

In 1980, Dr. Small established the Harriet Tubman Clinic in Oakland. As one can ascertain, Dr. Small is strongly committed not only to providing primary medical care, but also to assuring access to those who would not otherwise receive care. He is a model of the type of physician most needed for real health care reform and equal access for all.

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## Economic Class Conflict, Race...

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genocide was executed by the state against an indigenous and sovereign native people as a matter of official policy.

Ignatius Loyola (a Nos-tradamus associate) founded the Jesuit Order monastic system after which Hitler modeled his infamous Death Head S.S. training schools. The first California wine industry was built with Indian slave labor, and peonage administered in Jesuit-run missions under authority of the Spanish crown. Racialist and religious persecution and prejudice foreshadowed and justified this entire affair.

### Race, Property, African Slavery, Civil War and Rights

Africans were portrayed as black savages, heathens, and sub-humans by Article 1, Section 2 of the United States Constitution as

three-fifths of a person (now amended by the Fourteenth Amendment). This formed the moral justification for brutal extraction of three centuries of forced labor, which remains uncompensated as you read this. The wealth and property amassed on the back of African slave labor formed the financial basis for the emergence of modern American capitalism, generating an estate of wealth and property so vast that the bloodiest war in American history was fought on American soil over its ownership, possession, and control. Again, racial prejudice and persecution walked hand in hand with economic class conflict, exploitation and oppression.

The racist, reactionary lynch law hysteria characterizing the American so-called Civil

Rights movement had its origins in economic class conflict over the ownership, possession and control of economic property and estates which previously were exclusive birth rights of white skin privilege. When the segregationist spoke about preserving a way of life, this meant certain jobs (government civil service, professions, skilled trades) business opportunities, higher standards of living, and social accommodations were economic property estate owned exclusively by the white skin privileged.

The working class elements under the legalized segregation system were misled by the class whose comfort depends on exploiting all (white, red, yellow, black and brown) workers, to believe that white working class's economic, political and social interests lie in racist suppression and persecution. History teaches that the opposite is true. Holding nonwhites in economic poverty

undermined the interests of white labor. Poor nonwhites, who were systematically kept so poor by institutionalized racialism that they were working for less than what whites were being paid or demanding through labor action, were repeatedly used as scab labor, breaking strikes and bringing down the wage scale in the same way prison, workfare, and so-called job trainee low paid workers unwittingly do today.

The civil rights and global liberation struggles of the same era drew the same lesson from bitter historic experience that we see in the common understanding reached by Martin Luther King and El Hajj Malik El Shabazz (Malcolm X) at the instant of their deaths; as reflected in their analysis of what had to be done. The lesson bitterly learned is political independence cannot survive without economic independence. Economic independence must be based on owning, as property, the means to acquire the materials necessary to implement socio-economic programs, and enforce political will, as part of the process of uplifting the standard of living and quality of life of the oppressed.

### Malcolm and Martin Rejected Racist-Religious Chauvinism

Our brother Malcolm X observed that being able to sit at a racially integrated lunch counter was meaningless without the ability to buy the lunch. He was observing that there is no liberation from material oppression without owning the means to produce real economic power. His transition from the Nation of Islam to the Muslim Mosque Inc. reflects his understanding that organizing exclusively along racial lines isolated any movement so organized and was inherently divisive within the context of a class struggle framed in economic terms and willing to defend itself by any means necessary.

Brother Malcolm's move to form the Organization of African American Unity reflects the understanding that a movement which required belief in a specific religion as a condition of membership would not only isolate necessary potential support and allow an economic, political and social struggle to be falsely defined as religious conflict (as in Bosnia) but also leave itself open to divisive attack along religious lines.

Dr. King stated, before his murder, that one mistake of the movement was that America had not been required to pay an economic price for civil rights and that, through an economic working class struggle for radical redistribution of wealth, beginning

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percent administrative fees that the insurance companies use.

Highland Hospital is the (Alameda) county hospital and provides health care for people with no insurance or people with no Medi-Cal. Their emergency room, as far as trauma goes, does an excellent job, but Highland is underfunded.

Let's get back to the 25 percent of funding that goes to administer our insurance.

### If You "Under Treat," You Get A Kick-Back

We have 1,500 different insurance companies in the U.S. that insure health care. In Canada the administrative rate is about 3 percent of the total dollar, not 25 percent. We could take this money and use it to provide health care. For instance, we have not had primary care physicians opening offices, and staying in practice for more than a year in the Oakland area in the past five or six years. The reasons are economic. We have had six hospitals fold. Yet the insurance companies are swelling on mass products, and Clinton will let the insurance companies control it through managed care—HMOs, supposedly man-

aged competition, but there is one large HMO in California, which actually reimburses money to doctors who save them money.

In other words although they don't use the word "undertreat" (they say "economically save money"), you actually get a refund in money from them for saving them money. Another HMO, which happens to be the largest HMO in California has traditionally given bonuses to their supervisors and people who retired or were laid off and not replaced. So I'm afraid what you might see with these HMOs who have greater emphasis on financial awards to physicians who save them money (you know that everyone wants to practice effective health care as cheaply as possible) [is]...that consumers [won't] know that they may be going to an HMO that rewards their physicians for perhaps using cheaper medications and saving money. I'm afraid that you will see a lot of that in "managed competition."

COMMEMORATOR: I want to show you one other thing, I received this from some people

back in Tennessee. They have already put in a managed care plan based on a waiver they got from the Department of Health and Human Services. They're getting rid of Medicare and Medicaid in Tennessee and calling it Tennessee Care or something like that.

They're going on with their managed care program as if this thing has already been to Congress and it has not. The State of Oregon has passed a plan, a rationing plan, and Michigan and Wisconsin have also requested a waiver. These people in Tennessee seem to think that is a plot to put in the Clinton plan through the back door, so to speak. By each individual state getting waivers long before this thing even goes to Congress. By the time it goes to Congress, they will already have their plan for managed care intact and their Medicare obligations waived.

DR. SMALL: I understand that there are certain things that they will not do. What specifically are they waiving in Tennessee. Do you know?

COMMEMORATOR: They are waiving their federal Medicare obligations, and putting in their own plan.

DR. SMALL: Do you know what rights the citizens are losing under Medicare and Medicaid?

COMMEMORATOR: Poor people in Tennessee will no longer be eligible for the same amount, duration, and scope of services, uniformity of services, eligibility standards, or freedom of choice as was first established 30 years ago under Lyndon B. Johnson. Everyone is supposed

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to have equal access to health care regardless of how much money they have or how old they are. Title Nineteen sets forth a federal guarantee that everyone has access to medical care.

**DR. SMALL:** The Clinton plan is going to allow the individual states to say how they are going to implement the plan. I think that this again points to the need for a national health care plan that will guarantee you will be treated whether you are driving through Tennessee, Mississippi, Michigan or wherever. There is probably going to be a single-payer plan on the ballot in 1995 in California, which I'm sure the insurance companies will go completely berserk spending billions and billions of dollars to defeat. Individual states can come up with their own managed

care plan which will guarantee a sizable profit for the insurance companies which will be administering them. It's like, how does the cat protect the mouse? The people who traditionally make large profits in health care industries are now going to manage the remaining funds of the system. So, I think that you are right, each state can probably set up its own managed care system before they have passed one nationally. **COMMORATOR:** It's very interesting what you mentioned there, because it does mean that if you drive through Tennessee and get sick, you are subject to a different set of rules and guidelines. So we are planning to point out that this thing is happening. While everyone is in the town hall

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with the "Poor Man's Campaign," America would be forced to pay billions. He also took an internationalist economic and political position by calling for an end to an unjust and imperialist war. He was attempting to lead all races and religions in an economic class struggle when he died.

His position was beginning to evolve to appear very much like a mature and evolved Malcolm X. He received the same death penalty. Who pulled the trigger in each instance is not clear. The fact that the ruling class successfully participated in conspiracy to instigate murder by public lynching is, however, crystal clear.

### Official Raid Version: More Questions Than Answers

We now see the same racist-religious hysteria, methodology come full circle in the media firestorm that preceded and followed the police raid on the Nation of Islam's Muhammad's Mosque at 2033 Fifth Avenue in Harlem. The New York City Police Department employees, whom we are told received the original 911 call allegedly claiming that there was an armed robbery in progress and dispatched officers to the Mosque,

are now under internal departmental sanction. The Police Commissioner has officially admitted that the authenticity of the alleged 911 call was highly questionable at best.

No adequate explanation is forthcoming as to why the computer generated notice (allegedly) was never relayed that the location for the alleged robbery, the Mosque, was a sensitive location, requiring certain official clearances, contact and approach procedures prior to entry. Although it is common knowledge that the NYPD's intelligence division, and the FBI, have been monitoring NOI activity even prior to Malcolm X's public lynching, the police claim they didn't know the location was a Mosque.

The previously mentioned NYPD's sensitive location policy originated from a similar raid on the NOI's 116th Street Mosque, April 14, 1972. The NOI member charged with disarming and murdering officer Phillip Cardillo during that incident was acquitted of murder. A second trial for assault ended in a mistrial and the charges were eventually dropped.

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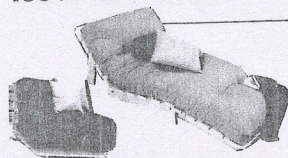
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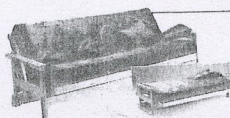
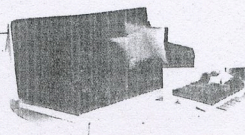
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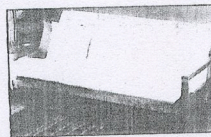
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meetings, outside the meetings Donna Shalala is waiving Medicare obligations for states, nationwide. It is interesting that she would do that, knowing that there is a national plan on the way to Congress.

"Managed competition" and "managed health care," is this the same thing?

**DR. SMALL:** The "managed care" is what the HMO is, but too often what we have is insurance companies managing the money and not providing enough funds for hospitals and for the primary care physicians to provide adequate care. So, you have a situation in

which hospitals fold and situations where physicians don't go into primary care medicine. That is the situation we have here in Oakland and it is similar to the situation in most of the major cities in the United States.

### We Are The Gate-Keepers!

**COMMEMORATOR:** Is primary care just becoming cost prohibitive, is it cheaper, is it more lucrative to specialize?

**DR. SMALL:** Basically, 15 percent of medical graduates go into primary care. Primary care is preventive medicine. We are

"gate keepers!" We see the patients initially and refer them to specialists. In Canada, 50 percent of doctors go into primary care. But we have a situation in the United States where we have the tail wagging the donkey, rather than the head of the donkey wagging the tail. Primary care should actually be playing a leadership role but 1) they make less money financially, 2) they are over-worked and work longer hours. Physicians are not going into medical school because they have a deficiency in their IQ. They say, "why should I become a primary care doctor and be underpaid when I can become a specialist and learn a few procedures well, and make two

or three times more money." See, that's part of the problem with the American health care system.

The HMOs made the primary provider the "gate keeper." They have basically designed a program of referrals where, in order for us to refer someone to another physician, we have to either fill out a form, or we frequently get phone calls for specialists saying this physician is out of the office, we do referrals, make phone calls, you get a tape recorder, get put on hold, etc. At our office we have had to hire someone just to handle the phone calls and referrals from the HMOs. So we have a situation in which American medical students are not going into primary care.

Of course, the fact of the matter is, if we insured everyone in the United States we would not have enough primary care doctors to take care of them. There would have to be a rearrangement of the entire system so that the tail would no longer wag the head, we would have people going into primary care, but our system is so top heavy and specialized that if everyone in Oakland were insured there would not be enough primary care physicians to take care of them.

### HMOs are Discount Healthcare for the Middle-class

**COMMEMORATOR:** So what happens to the low income mother or child or person who is seeking health care? Primary care is what's needed but the situation is designed for economic profit.

**DR. SMALL:** They cannot even get into an HMO, because the HMO is discount health care for middle class people. Like, if you work for University of California at Berkeley, you join HMOs. It is so much of a redundancy, that when you turn on the TV, you see HEALTHNET, LIFE GUARD, AETNA, all advertising as if they have something different to say. They all use the same physicians, the same health care packages, they all use the same HMOs, they all use the same IPA physicians. Yet they spend millions of dollars advertising.

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## SWAT Team Kills 75 Year Old

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Wayne Singletary organizing with the local service workers association said, "The real issue for low-income communities has been totally submerged in the media presentation of the situation."

The treatment Reverend Williams received at the hands of police has become such an entrenched pattern of practice; and recourse under the law virtually nonexistent to the point where low-income people in Roxbury who came together to meet and talk during the height of the sensationalist and racist hue and cry surrounding what became known as, "the Charles Stewart case" commented — "There ought to be a law against people breaking down the door of your house, grabbing your son out of his bed, and beating him up." The reply follows, "There is."

The Fourth Amendment to the Constitution was enacted to secure the people of this country against the government's search and seizure of their persons, homes, papers, and effects. The Fourteenth Amendment to the Constitution was passed to protect people of this country from discrimination and involuntary servitude. The 14th Amendment has enforcement apparatus with both civil and criminal penalties. The Civil Rights movement voiced the needs, hopes and aspirations for political parity of Black Americans to pass the 1964

Voting Rights Act. However, that act merely recognized what was ALREADY LAW. It did not eliminate what is, in fact, second class citizenship.

"Government officials have trampled on the Fourth Amendment right to remain secure in your person, papers and effects," stated Joshua Mason, a 'Know Your Law' sessions volunteer. "This police action indicates what has happened to our legal system because of the need to keep drug prices high, so powerful interests can make a profit off them."

"Reverend Williams died of the excesses of the war on drugs," announced a neighbor. "It was out and out murder." Even while she spoke, friends and fellow Dorchester residents were putting up signs to announce meetings under the auspices of Coalition of Concerned Legal Professionals, at the offices of the nearby Eastern Service Workers Association at 8 Newcomb Street. "We can't permit this to continue. Our people, innocent people like Reverend Williams, are victimized daily by lying or mistaken informants and police seeking headlines, promotions or additional funding," said a CCLP volunteer.

"None of us can go about our business without understanding that since the April 29th 1992 Rodney King verdict the country has changed," said Singletary.

The protests which followed represented the knowledge that minorities and the poor don't have justice in this country.

False was the notion that economic policy could continue to endlessly deprive our cities and poor communities without something blowing up. Hundreds of thousands protested across the nation taking up the chant, "No justice, no peace." The population, given the message that recourse could simply be gained in the streets responded to en riots by declaring martial law in L.A. and other locations throughout the country. More 18,000 people were arrested in L.A. alone. After five days of protesting, police went door to door for days searching homes without warrants. Reports of front yard arrests by those with no prior charges threw civil rights out the window.

The fact is, there are at least three such Rodney King beatings sustained in low-income communities every night.

From reports, "...officers clearly knew nothing about the neighborhood," said Israel Houck, a resident of the neighborhood. "They say they're trying to help, but investigations or a cash settlement will not bring Reverend Williams back nor force the police to obey the law. That's why we're organizing."

All those interested in finding out more, and in helping to change the situation, call CCLP at 617-427-9117. Ask for Charles.

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