

# Petition Drive, Strikes Fight To Save Hospitals

by Marcia Merry Baker

Last spring, a petition began circulating at thousands of hospitals across the country, whose signers hope to pressure lawmakers to relieve the disastrous impact of the 1997 Balanced Budget Act on the financial condition of hospitals. The American Hospital Association (AHA) originated the drive, and aims to collect 2 million signatures by this fall. Among other things, the 1997 BBA mandates reducing Federal payments to hospitals for Medicare and Medicaid patients. Within only a few months of implementation, the first round of payment cuts pushed hundreds of community hospitals into the red, or deeper in debt. In response to pressure from an AHA petition last year, the White House and Congress helped restore some of the mandated Balanced Budget Act cuts earlier this year, but the 1997 law still stands, and specifies deeper cuts ahead.

The predictable effects of the Balanced Budget Act (BBA), coming on top of more than two decades of “managed care”/health maintenance organization (HMO) cuts, and predatory raids by hospital chains, have imposed impossible financial burdens on hospitals. In a letter initiating the petition drive, the AHA wrote that we must “take our crusade beyond the hospital walls and into the community. Because patients and communities stand to be most hurt by reduced access to health care services caused by the excesses of the BBA, we need to enlist them in our cause [with] a community petition drive . . . to call on Congress and the Clinton-Gore Administration to help local hospitals. We are asking you to recruit hospital volunteers and trustee leaders to take the petition to their friends, neighbors, colleagues, civic and religious organizations.” The letter ends, “Senators, Representatives, and the Administration must be held accountable . . . especially in an election year, when candidates are seeking the support of their constituents.”

This marks a shift from the original stance of the AHA, which, in the 1970s and 1980s, advised medical institutions to try to “adjust” to the stringencies of the era of managed care, first authorized by the Dec. 29, 1973 “Health Maintenance Organization and Resources Development Act.” But now, it is life or death for the health care system of the nation.

For example, in Pennsylvania, four out of five hospitals cannot cover operating costs. During July, staff at the premier West Penn Hospital in Pittsburgh (542 beds, founded in 1848) have been circulating the AHA national petition daily in the cafeteria. In Iowa, 91 out of the state’s 126 hospitals are in the red. In Massachusetts, two-thirds of the hospitals are losing

money; hospital margins are at a *negative* 3%. Besides the threat to delivery of medical treatment, local communities are suffering losses of jobs and tax base. From just 1998 to February 2000, Massachusetts lost 9,900 health-care-related jobs.

## Strikes, Too

At many hospitals, staff strikes are under way, or threatened, because employees are making an issue of being unable to carry out their health-care tasks, under the conditions of overwork and underpayment that now prevail.

On July 6, a successful one-day strike against ten Northern California hospitals was held by Service Employees Union Local 250, to protest conditions now endemic under managed care. The strike, conducted by about 4,000 hospital workers, including technicians, licensed vocational nurses, respiratory therapists, clerks, and cooks, and honored by many nurses, is part of the SEIU hospital workers’ national campaign for safe staffing levels in hospitals. There are several other ongoing hospital strikes in the San Francisco Bay area, including those at two Stanford hospitals, where 1,730 nurses are in their fourth week of a strike.

The SEIU Local 250 statement calling for the July 6 action notes: “We are striking only because we believe that there is no other avenue available to pursue our goals for the improvement of patient care, and that the harm from allowing existing conditions to continue unabated is greater than the harm from the action we are taking to correct them.” Local 250 is on record calling for universal health care, instead of managed care, for all Americans.

In California and other states, the mass circulation document released in May by the LaRouche Presidential campaign, titled “Ban HMOs Now, Before They Get You and Yours,” is getting wide attention. On July 5, the Alameda County, California Democratic Central Committee passed a resolution against HMOs that was introduced by Democratic Party leader Judith Nuerge, active in the LaRouche nomination campaign. The resolution follows passage on May 22 of a similar resolution by the City Council of Cleveland, Ohio (see *EIR*, June 2, 2000). The California resolution calls on Federal, state, and county governments “to investigate the provision of health-care services by health maintenance organizations and managed-care organizations.” (A provision urging their abolition, if warranted—a proviso modelled on the Cleveland resolution—was deleted before passage.)

The California resolution further states that “comprehensive, high-quality health-care insurance coverage should be available to every resident of Alameda County,” and that “the financial practices of certain health maintenance organizations and managed-care organizations often serve to limit quality health-care services to those in need of medical treatment.” Copies of the resolution will be forwarded to the Alameda County area governments, the state government, the U.S. Congress, and the Democratic National Committee.