Mass. Welfare Department Kicks in on Universal Health Care

By Simson L. Garfinkel

BOSTON—On July 1 the first phase of the Massachusetts Universal Health Security Act will begin operation, as Medicaid coverage is extended to four new groups of people under a program called Common-Health.

The groups covered by Common-Health include "welfare-to-work" (people currently on welfare who take jobs that offer no health insurance), working disabled adults, near-poor children under the age of five and pregnant women (together considered one group), and disabled children. Near-poor children are defined as children aged one to five who are at or below the federal poverty line, and infants aged zero to one whose families earn up to 185 percent of the poverty line.

Doctors in the state are generally in favor of the program because it protects people who until now have precluded seeking employment for fear of losing their Medicaid insurance. "The health care law now allows these people to return to work and have health insurance coverage," said Dr. William McDermott Jr., executive vice president of the Massachusetts Medical Society. "We applaud the state's extension of access to care."

An estimated 600,000 people are uninsured in Massachusetts, and nearly half of this number work part- or full-time. "What's happened is that the very poor have health insurance, but the near poor

WHAT'S NEWS

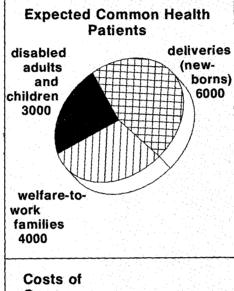
- **6** Hospitals must report hazardous materials
- **7** Bill tying insurance forms to misconduct killed
- **8** Residents avoiding AIDS patients

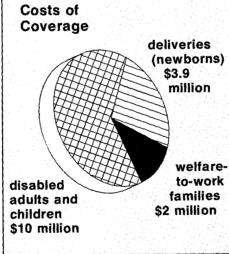
DEPARTMENTS

Op-Ed	
Classifieds	L
Seminars	

and the people who are struggling to make their lives do not," said Dr. Robert Blendon, chairman of the Health Policy and Management program at the Harvard School of Public Health.

"We have designed a welfare system, and Medicaid is a major part, where the incentives are for people right on the mar-





gin [of poverty] not to work," said Blendon.
"And that is the terrible reason that we need health insurance [for the working poor] and not just for people who are on public assistance."

CommonHealth is the Department of Welfare's contribution to the state's Universal Health Security Act. By 1992 provisions of that act will provide insurance for every resident of Massachusetts.

"Under the new law Massachusetts will offer 'wrap around' insurance to make

up the difference between the amount of coverage, if any, provided by employers, and the amount provided by Medicaid," said Heidi Urich, a policy adviser in the governor's Office of Human Resources.

CommonHealth will cover the cost of 4,000 families under the welfare-to-work program and 3,000 disabled adults and children. Massachusetts estimates that CommonHealth will cost \$15.9 million in 1989 and \$28.4 million in 1990. Approximately two-thirds of that cost will be for the disabled.

The insurance will be paid for by contributions from the state and the individual. There will be a sliding scale. The total number of people who will be affected by the program will depend on the amount of money that the Massachusetts legislators allocate to the program. Massachusetts is currently in the midst of a budget crisis with a projected shortfall of \$305 million.

However, Blendon asserts that the current budget crisis should not have as large an impact on the Universal Health Security Act today as it may have in 1992 when the act takes full effect. Said Blendon: "The benefits don't correspond to the major economic impact which will be 1990 and beyond. If this was 1992 it might have a significant impact."

Massachusetts officials concur. Said Michael Levyveld, a spokesperson in the state's Executive Office for Administration and Finance: "I don't really believe that the current situation—what is being called the budget crisis, which seems to be a short-term problem—is going to affect spending for the health care legislation that [Gov. Dukakis] has signed."

Last year, New York Gov. Mario Cuomo's budget included one of the provisions of CommonHealth—to raise the cutoff limit of Medicaid funding of children to 185 percent of the poverty level.

"Everybody is for it, but it didn't get through because of the budgetary conditions," said Loretta Cole, director of health policy at the New York County Medical Society.

Currently a bill is pending in the New York State Assembly that would expand Medicaid coverage to 88,000 more New Yorkers. Those who would be affected by the bill are among the estimated 1.3 million low-income residents in the state without health insurance.