



NON-PARTISAN ELECTION MATERIAL

DOCTORS FOR CHANGE VOTERS GUIDE 2008



Doctors for Change (DFC) is thrilled to present our 2008 Voters Guide – focused on health care issues in our community. We want to thank all of the candidates who took the time to answer our 3 health care related questions, and we sincerely hope that this guide will foster discussion on how we as a community can improve access to and the quality of health care in Houston and Harris County.

Please visit our website at doctorsforchange.org for more information on our organization, a 501(c)(3), non-partisan organization of over 200 health care professionals who are committed to improving our local health care through multiple DFC projects, educational forums, and collaboration with other local organizations.

STATEWIDE ELECTIONS

Questions proposed to our statewide election candidates

Texas is facing a major health care crisis, with over 25% of Texans currently uninsured compared to 15% of Americans. Being uninsured is associated with shorter lifespan and poorer health, and communities caring for large numbers of uninsured individuals face a huge economic burden. What policies (if any) do you support to increase coverage of Texans? What policies would you adopt to address health coverage specifically for children?

The majority of Americans (81% in a recent survey) are dissatisfied with health care costs and delivery. What are your opinions of our current health care system? What do you propose to improve health care delivery in Texas and the United States and what role do private insurance companies play in your proposals? What can we do to emphasize prevention and healthy lifestyles in our state?

The Texas Medical Center is the largest medical center in the United States – patients receive state of the art care, and cutting edge breakthroughs in medical research happen constantly. Multiple studies have recently demonstrated that certain health problems, like cancer, are more prevalent and have worse outcomes in patients with lower incomes and among minorities. How can we as a state support research into health disparities? How can we specifically support efforts to improve cancer awareness, prevention, research, diagnosis, and treatment in our state?

Yvonne Adams Schick (L)

No response received.

John Cornyn (R)
Rick Noriega (D)

No response received.

Everyone should be guaranteed access to quality, affordable health insurance and be expected to make responsible choices in return – Washington’s failure to lead on this issue is unconscionable. State governments in Utah, California, and Massachusetts have been forced to develop solutions to their health care problems because Washington has refused to address the serious issues we currently face. In 2006, 47 million Americans – including 8.7 million children - lacked health insurance, and for those with insurance, the cost of health insurance premiums have increased 78 percent between 2001 and 2007. According to analysis from Families USA, 89.6 million Americans are uninsured for at least part of the year.

My proposals for health care focus on:
Improving Coverage for Children: My plan calls for increasing eligibility for children’s health insurance by raising the income eligibility requirement, currently 200 percent of the federal poverty level, to 300 percent of the federal poverty level. Families in Texas are eligible for the program as long as they make less than \$42,400.

Addressing the Uninsured Problem: Every Texan who wants to purchase private insurance should have access. They should also have options. I have called for the immediate implementation of an Insurance Connector for individuals who wish to buy private insurance. This Connector would link Texans with insurance plans that are suitable for their needs. The Federal government would negotiate with private insurers to provide health care options for all Americans. Texans who make too much money to qualify for Medicaid or the Children’s Health Insurance Program, but still can’t afford their premiums, would receive a discount towards the purchase of health insurance based on a sliding income scale. The connector will be easy to enroll in and will provide options for Texans.

Years of neglect by our elected leaders in the State House and in Congress have led Texas to have the highest rate of uninsured in the country. According to analysis of Census data, nearly 45% of Texans don’t have health insurance for all or part of the year. That’s more than nine million Texans. But the real failure is the number of Texas children who aren’t covered. More than 20% of Texas youngsters don’t have coverage—one in five Texas children.

In addition to massive gaps in health security and coverage rates, skyrocketing health care costs are a burden to every Texan and a sign of the failure of the current system. Premiums are rising for everyone. Between 2000 and 2006 family health insurance premiums for Texas workers rose 7.4 times more quickly than median earnings and family health premiums rose by 79.7 percent, while earnings increased by 10.8 percent.

To address these problems, we must focus on:

Tax Breaks for Small Business: We need to incentivize small businesses to provide health care for their employees. That’s why I have proposed tax credits to cover up to 65% of the cost that small businesses pay for their employees’ health care premiums

Protecting Seniors: My plan proposes a solution to the Medicare Part D “donut hole” that leaves many Seniors without prescription drug coverage for part of the year. I also propose updating the formula that determines Medicare physician payments to ensure that doctors are able to provide quality affordable care for Texas seniors.

Making It Affordable: We must move the nation to a national technology standard that is widespread and usable. We must also move the country to electronic medical records that will save money and increase efficiency. It is estimated that portable, comprehensive electronic medical records would provide cost savings as high as \$165 billion every year, while eliminating redundancy and errors.

Making Our System More Transparent And Accountable: My plan will empower consumers when they’re making health care decisions by making available important information:

The calculation of premium: health insurance recipients should have an avenue to challenge what they perceive to be unwarranted premium increase;

Physician ratings: health insurance recipients should know how these rankings are compiled and rankings should be based on peer-reviewed criteria; and

The calculation of the medical loss ratio or the health benefit expense: health insurance recipients should know what is being spent on care and what is being spent on marketing and administrative costs.

The best way to address disparities in the treatment of illnesses like Cancer is to make sure that all Texans have access to health insurance and high quality medical care. By doing this, and by emphasizing preventive care, we can lower the cost of addressing such illnesses and reduce inequities present in the current system.

US REPRESENTATIVE DISTRICT 22

Nick Lampson (D) *No response received.*
Pete Olson (R) *No response received.*
John Wiedler (L) *No response received.*

US REPRESENTATIVE DISTRICT 7

John Culberson (R) *No response received.*
Drew Parks (L) *No response received.*

Michael Skelly (D) The high rate of Texans who live without health insurance because they cannot afford it is inexcusable. Texas has more uninsured children than any other state and that has severe consequences for our economy as well as for our quality of life.

I believe the SCHIP program should be expanded to cover additional children. Gridlock in Washington has repeatedly stalled the reauthorization and improvement of the program over the past two years. I believe that the health of our children is so important that the two parties have a moral imperative to work together and find a solution. We can't allow Washington to continue to play politics with children's healthcare.

Keeping our children healthy will lead to reduced healthcare costs later in life as well as a longer and more productive lifespan. It is absolutely imperative that our nation guarantees the health of our children.

The inefficiency and waste endemic to our health care system translate into higher medical bills for all Americans. Instead of providing care early, when it is most affordable, too many Americans put off receiving care until it is far more expensive and inefficient. In Congress, I plan to focus my attention on reigning in administrative costs and focusing upon providing preventative care to cut down on these inefficiencies. We also need to allow Medicare to negotiate for cheaper drug prices as well as the safe importation of drugs at lower costs.

Every year at my company, I had to sit down with my health insurance provider to go over the cost of insuring his employees. Each year, deductibles went up while the level of service went down, and I had to explain that to my employees. I know I'm not alone—it's difficult for small and mid-sized companies to provide health insurance every year and it's making American companies less competitive.

Our national government should lead the states in the provision of healthcare research by fully funding the National Institute of Health and the Center for Disease Control. Investments into healthcare research pay dividends for all of us as it helps to bring innovative new treatments to market faster and bring down treatment costs.

Health care disparities can be reduced through the expansion of the SCHIP program, lower prescription drug costs, easier access to immunizations and the reduction of health care costs in general. The utilization of healthcare services should not risk bankrupting American families, so Congress must work to ensure lower administrative costs and reduce inefficiencies.

US REPRESENTATIVE DISTRICT 2

Ted Poe (R) *No response received.*
Craig Wolfe (L) *No response received.*

US REPRESENTATIVE DISTRICT 9

Al Green (D) *No response received.*
Brad Walters (L) *No response received.*

US REPRESENTATIVE DISTRICT 10

Larry Joe Doherty (D) *No response received.*
Matt Finkel (L) *No response received.*
Michael McCaul (R) *No response received.*

US REPRESENTATIVE DISTRICT 18

John Faulk (R) *No response received.*
Sheila Jackson Lee (D) *No response received.*
Mike Taylor (L) *No response received.*

US REPRESENTATIVE DISTRICT 29

Joel Grace (L) In response to your questions, I would generally say that the problem we face is due to a lack of understanding of economic principles. The problem is government. Congress began forcing people into HMO's in the 1970's. This is very likely the largest part of the price problem we see today.

I would propose getting government out of the health care system everywhere. Private insurance companies should be de-regulated, along with all sorts of other de-regulation, to allow for lower costs to benefit the consumer.

Another huge problem is the act of subsidy to fat cat, well connected industries, such as the corn industry. Why? Because High Fructose Corn Syrup is a horrid poison being put into our food supply for the benefit of the producer. You should know how bad this stuff is for us. Along with Partially Hydrogenated oils, and all sorts of other additives that are nasty. The FDA is totally corrupt, for many reasons, especially for allowing such stupid ingredients to be put into our food supply. All of this makes for protected profits by corrupt industry insiders.

Last but not least, you really need to go to www.HealthFreedomUSA.org and find out about what the United Nations wants to do to us via the coming Codex Alimentarius regulations. Such regulations would make vitamins, minerals, enzymes, herbs, etc highly restricted or illegal, all in a time when people are screaming for government to make health care 'more accessible.' This is all backwards. Codex is to protect the pharmaceutical industry. Or worse, to reduce the population....

Freedom is relative to free markets. We cannot sustain more government control or there will likely be violence in our society. (BTW-The government created the current credit crisis by taking risk out of the low-yield bond market in the 1970' and again in the 90's which artificially drove up home prices. Government intervention almost always creates problems for people.) I urge you to read "Basic Economics" by Tomas Sowell to understand better why government should stay out of health care delivery, food delivery, clothing supply, shelter supply, everything.

Gene Green (D)	Expand SCHIP in Texas for children and nationally create a program for health insurance coverage for the uninsured.	Using private insurance as base to expand to people who cannot afford private health insurance.	I'll continue to support federal research funding for Texas Medical Center.
Eric Story (R)	<p>First I would like to address the large portion of your numbers that are in our nation in violation of US laws. These individuals should be deported back to their home country and the cost of the return trip should be deducted from any promised aid. Once the millions of illegals are removed from our borders, the largest portion of this problem will go away.</p> <p>As for legal immigrants, I would like to see us join with other nations that require proof of ability to support yourself including healthcare, prior to entry. Adults need to take responsibility for themselves. It is time for the US to move away from the welfare mentality. Today in Texas, any child in a low income family can be covered either through Medicaid or the CHIPS program.</p>	<p>After traveling to many parts of the world, I can proudly state that we have the best health care system available. I would like to see a priority placed on American students getting into our universities and medical schools over non-citizens. I would like to see the insurance companies get out of the business of diagnosing and determining the best treatment for patients and leave the treatment to the doctor and patient.</p> <p>Many companies have both prevention and healthy lifestyle training as a part of their routine. I would like to see us encourage others to do the same.</p>	<p>The subject of cancer is dear to my heart. My dad lost his life to thyroid cancer 11 years ago. My daughter won her battle against thyroid cancer a year ago. I have seen what seems to be a large volume of cancer in those neighborhoods that are near the chemical plants in our area. These areas do tend to be lower income but I do not believe the cancer is related to the income level. I do believe that Congress should address the level of carcinogens that are released into the air, especially near residential areas and hold those companies responsible for the related health care for those residents that live in the area.</p> <p>The tax payer is already pouring large sums of money into research and education. There comes a time when the individual has to take on the responsibility for his/her own lifestyle and health.</p>

STATE SENATOR DISTRICT 11

Mike Jackson (R) Joe Jaworski (D)	<i>No response received.</i>	I believe Texas has the finest doctors and medical facilities in the nation. The practical burden of doctors' and other health care providers and facilities' being held down by insurance industry practices is what is wrong in the delivery of medicine today. I believe that streamlined payments to health care providers - and letting physicians be the ones who practice medicine - would go a long way to making physicians and their patients more satisfied with health care delivery.	Texas needs to foster a culture of wellness. Government can incentivize wellness and wellbeing by ensuring that children learn good behavior from their youngest years. Eating well and exercising are simple and effective ways to foster wellness; government can't make you be well and practice sound living, but it can incentivize it. So, I'll leave it to the bureaucrats to suggest how we can incentivize wellness, and I will support those policies. One thing I would support outright to address cancer rates is a smoking ban statewide. I supported one in a citywide context when I was on the Galveston City Council.
Clifford Messina (L)	<i>No response received.</i>		

STATE SENATOR DISTRICT 17

Chris Bell (D)	Last year, Congress had an opportunity to expand the Children's Health Insurance Program that would have provided insurance for approximately half a million children and adults who currently do not have insurance. President Bush vetoed that legislation. Maximizing the CHIP program is fiscally sound and would do more to reduce the number of uninsured Texans than anything else. As Senator, I will work to expand eligibility to the maximum amount and ask Congress for swift action for further action.	I'm surprised 19% of Americans aren't dissatisfied with health care costs and delivery. When my wife got breast cancer, we struggled not only to beat the disease but to deal with our health insurance company. Our rates skyrocketed. Now she's healthy, and I have a better understanding that government can do little to make people do push ups but can do much to ensure that insurance companies pay the benefits for which we pay premiums. I worked in Congress to create small business health care pools and think that would be helpful in Texas.	I will not rest until cancer treatment is available to everyone in Texas regardless of income. First, Texas is perfectly positioned to be a leader in medical research. I will protect privately funded research efforts in this state. Second, we must mandate that insurance covers cancer treatments and then work towards making sure everyone has access to affordable health insurance. My family was lucky. When Alison got cancer, we had insurance. Every Texan deserves the same chance she got.
Austen Furse (R)	<i>No response received.</i>		
Grant Harpold (R)	<i>No response received.</i>		
Joan Huffman (R)	<i>No response received.</i>		
Ken Sherman (R)	<i>No response received.</i>		
Stephanie Simmons (D)	Texas has the nation's highest rate of uninsured persons. An even more staggering statistic is that of our children here in Texas. Over 20% of our state's children are uninsured compared to the national average of about 12%. Healthcare reform must be addressed this legislative session with more veracity. Medicaid and CHIP are important programs designed to help our most vulnerable citizens. Under-funding those programs at the state and federal level, increases the burden on all taxpayers, businesses, and medical facilities alike. I absolutely support the opportunities available for the state to obtain matching funds from the federal government to maximize local and state tax dollars spent on healthcare. As lawmakers, we must budget realistically for projections in caseloads. I believe we should restore the outreach programs previously dismantled to ensure easier access to enrollment. Reversal of many of the existing policies is necessary to engage Texas citizens in need of the coverage.	The health care system in Texas is facing significant challenges. The state's health care costs are increasing, its uninsured rate is the highest in the nation, and insurance premiums are costly and often out of reach for individuals and small businesses. In addition, proposed changes at the federal level place millions of dollars in funding for the current system at risk. New opportunities exist to help Texas address these pressing issues. Recent changes in federal law, policy, and innovative Medicaid-funded state health care reform initiatives across the country offer strategies to create a new plan for health care in Texas that incorporates the health care needs, existing delivery system, and culture of the state. A state-based reform in Texas can be developed to promote access, affordability, and choice in extending health insurance coverage to more Texans, protect at-risk federal funding, maximize federal funds to cover the uninsured, and build on the strength of the state's existing public-private partnerships. Taken together, these new initiatives would create the platform for broad-based, comprehensive health care reform. Subsidies alone cannot provide a complete solution for Texas' uninsured. In order to expand coverage to more of the uninsured, small business and individual insurance options have to be more affordable than they are today. Changes to increase portability and choice of health care insurance and coverage, facilitate work site enrollment and payroll withholding, allow pooled contributions from multiple employers and jobs, increase affordability by pooling risk, and ensure pre-tax contributions for health care by employers and employees will help more people purchase insurance.	The solution to the challenges Texas faces must include collaboration between state, local, federal and private partners. By forging ahead together we can begin to rebuild an infrastructure that will encourage research, improved awareness, and prevention. We know that statewide uninsured rates are highest among minorities in Texas. Reform could offer choices to address cultural needs and preferences. We also know that almost 80% of the uninsured have a family member who is employed but insurance is either not available or not affordable. By providing incentives to increase employer-sponsored coverage to promote voluntary contributions from employers, we could increase efforts to educate our citizens by balancing their knowledge with a subsidized, sponsored insurance program. A plan for health care reform must be aggressive in its goals but responsible and measured in its implementation. This framework for a new stronger healthcare system in the state will educate, protect, and support critical safety net providers that are all needed to impact our state's residents.

STATE SENATOR DISTRICT 4

Tommy Williams (R)	<i>No response received.</i>		
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STATE SENATOR DISTRICT 6

Susan Delgado (L)	<i>No response received.</i>		
Mario Gallegos Jr. (D)	<p>Lack of healthcare coverage is a burden for all Texans. Last session we expanded coverage to nearly 300,000 more Texans, this however is far short of the estimated five to six million Texans living without coverage. A large uninsured population means that all families feel the pinch, the rise in health insurance premiums has outpaced wages and inflation in the last two years alone. It is important that we find solutions to expand coverage.</p> <p>I support many initiatives that will expand coverage to more Texans. For example, simply enrolling all higher education students in low cost university plans would cover an additional 400,000 Texans. Also, expanding Medicaid eligibility to parents of Medicaid eligible children would not only cover those who need it most but would add coverage to another estimated 400,000 Texans. However, we also need to focus on access for our children. First of all, aligning Medicaid and Children's Health Insurance Program (CHIP) renewal periods, would decrease coverage gaps and cover an estimated 600,000 Texans. Also, if we allow parents whose employers do not offer dependant coverage to enroll their children into CHIP, we could cover another 400,000 Texans. Finally, we need to fully restore CHIP funding and bring healthcare back to an additional 150,000 children.</p>	<p>Not enough Texans have adequate healthcare coverage and sometimes costs can become unaffordable. We need to lower costs and improve delivery. The first step is to expand health plan coverage. Texas' uninsured population cost hospitals an estimated \$11.6 billion dollars in 2005. Since then, costs have risen. By delivering the prevention rather than treatment of disease we can lower costs and improve how Texans receive healthcare.</p> <p>If we address prevention and promote healthy lifestyles, we will see costs go down. As a state we need to address problems such as obesity, one in five Texans is obese and obesity is associated with high blood pressure, high cholesterol and an increased risk for several types of cancer. Chronic diseases such as those associated with obesity are the most common and costly diseases to treat throughout the United States. In Texas, it costs about three times more to treat obese children than children of normal weight. Obesity could cost the state a staggering \$40 billion by 2040. Therefore, addressing prevention is a good place to start.</p> <p>However, obesity and chronic disease are not the only factors contributing to costs. We must also address our healthcare workforce crisis that plagues the delivery of health services. Texas is underserved, three fourths of Texas counties lack an adequate number of primary care physicians and around 3,000 nursing students are not enrolled due to faculty shortages. Expanding training, "pipelining" students into health professions, education, and residencies are key in fixing these shortages.</p>	<p>During the 80th legislative session, the Texas House and Senate resolved to fight cancer. The legislature created the Cancer Prevention and Research Institute of Texas. Following the session, voters approved \$3 billion in funding for the Institute. The Institute was created to implement the state cancer plan. The plan is a comprehensive blueprint for combating cancer in Texas. The plan's goals are:</p> <ul style="list-style-type: none">• The Dissemination of Prevention Information and Services• Early Detection and Treatment• Healthcare Professional Education and Practice• Cancer Data Acquisition and Utilization (research)• Survivorship- Aiding Texans in their battles after cancer treatment <p>The Institute is currently supporting dozens of programs throughout the state aimed at addressing these goals. As the institute grows, so will the number of programs and Texans benefiting from it. The Cancer Prevention and Research Institute of Texas is a great model to follow in combating diseases such as cancer and addressing the inherit disparity of outcomes associated with socioeconomic status. I support further research into health disparities because of its importance in formulating policy and delivering healthcare. It is important to address these disparities using approaches similar to the Texas Cancer Plan. During the next legislative session I plan on continuing my support for these types of programs and their expansion.</p>
Gilbert Pena (R)	<i>No response received.</i>		

STATE REPRESENTATIVE DISTRICT 126

Patricia Harless (R)	<i>No response received.</i>
Chad Khan (D)	<i>No response received.</i>
Oscar Palma (L)	<i>No response received.</i>

STATE REPRESENTATIVE DISTRICT 127

Joe Crabb (R)	<i>No response received.</i>		
Joe Montemayor (D)	<i>No response received.</i>		
Justo Perez (L)	(1) I do not support any policies to increase coverage that is funded by tax payers and/or imposed by the State. (2) I propose that we adopt a policy that takes government completely out of the healthcare business.	(3) Our “healthcare system” should not be a “system” at all. State and Federal government should stop interfering with doctors, patients and private insurance. There should be no subsidies or regulations for the medical field. We should leave healthcare oversight to the medical community, patients and private insurance. It is my opinion that free of government intrusion, the medical community will self regulate to minimize liabilities, promote quality medical services and reduce costs. (4) As with answer #3 above, I propose we get government out of healthcare and stop interfering with private insurance so they can do business across State lines and therefore have a larger customer base, which should help reduce costs. (5) As the State government, we should do nothing at all. We must leave it to the private insurance industry and doctors to inform the public of prevention and healthy living. There is no need to spend tax payer’s money on government funded programs. These programs or informational campaigns simply create more bureaucratic expenses and ineffective efforts. The public does not trust government and ignores their programmed messages.	(6) Leave it to the private sector – government is wasteful; leave it to the profit seekers. (7) Leave it to the private sector – government is wasteful; leave it to the profit seekers.

STATE REPRESENTATIVE DISTRICT 128

Wayne Smith (R) *No response received.*

STATE REPRESENTATIVE DISTRICT 129

John Davis (R)	<i>No response received.</i>		
Sherrie Matula (D)	I plan to work on the children first. In the next legislative session, CHIP and Medicaid coverage for children needs to be fully funded, leaving no child uninsured. That is a major step and if accomplished, would mean that it would not be until the next legislative session that the other segments of the population could be addressed, starting with the over 65, chronically ill, and seriously ill.	I see both good and bad in the health care system today. I see qualified, caring health care professionals going above and beyond every day who are stretched to the limit. I see companies playing the lobbying system to manipulate votes in the House. I see people sick who cannot afford treatment go without. I see small business owners who work to make sure their employees are covered (health insurance) and yet not be able to cover their own families. I do not know enough about the problems to have a strategy to propose. I would hope that I could call on dedicated health care providers to give me the information and expertise to propose the direction to move in during the next legislative session. I believe that to emphasize prevention and healthy lifestyles in broad base way we need to utilize the schools to reach families of children – as a facility, not during the school day. I believe the senior centers and community gathering locations – churches, etc. would be the best way to reach the aging population – a kind of neighbor to neighbor approach.	The first way is to actually allocate funds on a permanent basis and begin the process of setting up a type of outreach approach – utilizing federal dollars when available. I would be willing to sit down with experts to formulate a plan to be presented in the next legislative session. My priorities for my district and Texas are education, health, and financial stability (re-regulation of homeowners’ insurance, electricity, and college tuition). Health is a major priority. Without this foundation, Texas does not have a future.

STATE REPRESENTATIVE DISTRICT 130

Allen Fletcher (R) *No response received.*

William Gray (L) *No response received.*

STATE REPRESENTATIVE DISTRICT 131

Alma Allen (D) *No response received.*

STATE REPRESENTATIVE DISTRICT 132

Bill Callegari (R) *No response received.*
Philip Kurtz (L) *No response received.*

STATE REPRESENTATIVE DISTRICT 133

Jim Murphy (R) *No response received.*
Kristi Thibaut (D) Health care is ultimately an issue that requires a national solution, but there are things state government can do to improve coverage. The state should expand the Children's Health Insurance Program (CHIP) to cover all eligible Texas children. Texas currently leaves millions of dollars in federal matching funds on the table that could help fund this expansion. By shifting costs from municipal governments to the state, we could receive another \$500 million in federal funds for CHIP, at the same cost to Texas taxpayers. Additionally, the state must pressure the federal government to meet its responsibilities for Medicare and Medicaid reimbursements, which it is not currently doing.

There is too much waste in our current health care system. We spend an estimated 15% on administrative costs, double that of many other developed nations. We must reduce waste and spend money directly on patient care. We need universal health coverage in this country. 45 million Americans have no health insurance, primarily because it is not affordable. And when the uninsured become sick, they often wait to seek care until their condition is more severe (and more expensive) to treat. A system where everyone is covered, and where regular preventive care is stressed, will ultimately save money. Part of preventive care means educating citizens on the importance of having healthy lifestyles -- proper diet, regular exercise, smoking cessation, etc. Again, getting people to lead healthier lives will result in fewer incidences of serious diseases like diabetes, lung cancer, heart disease, and reduce health care costs in the long run.

Reducing these disparities starts with covering everyone. Coverage should emphasize preventive care, which includes regular check-ups and increased education about the importance of healthy lifestyles. Thus we can reduce incidences of serious diseases, diagnose cases earlier, and treat them more successfully across all communities. And as previously stated, this will be cheaper in the long run.

STATE REPRESENTATIVE DISTRICT 134

Joe Agris (R) *No response received.*
Ellen Cohen (D) As a member of the Public Health Committee, I am dedicated to increasing access and improving the quality of preventative healthcare in Texas. I was proud to support for HB 109 by Rep. Turner to eliminate many of the bureaucratic roadblocks facing the working families that would apply for CHIP coverage. During the next session, I plan to push toward taking full advantage of all federal matching funds and expanding the amount of children covered by CHIP. Working across party aisles, I plan to continue the progress made last session where members of both parties can come together to improve healthcare access for Texas children.

Healthcare in Texas and the United States is increasing in costs and decreasing in coverage. I believe one of the biggest reasons for this is the amount of people who are uninsured or under-insured. As a businesswoman, I know firsthand the difficulties of rising cost, and I believe the state of Texas must move to keep our business environment competitive by doing more. More emphasis on preventative care is the single best investment we can make in the long term fiscal and physical health of our state.

Healthy lifestyle initiatives, particularly in our public schools, can help address concerns before they become a crisis. Investing now means dramatic savings in future cost and Texas must look at doing more to increase access for preventative care and coverage for more people in order to save on cost and cover more Texans.

First, we must continue to invest in the Texas Medical Center to keep it the world class research center it is today. As the first House sponsor of what became Prop. 15, I will continue to push for more investment in research dollars to fight diseases and find cures for cancer. The creation of the Texas Cancer Prevention and Research Institute focuses not only on laboratory research, but also on prevention measures to reduce the risk factors associated with increased cancer risk.

Secondly, we should expand programs designed to increase coverage so that those breakthroughs made in clinical trials become cures in our community. Helping to close the gaps between lower income and minority diagnosis and treatment will come when we adopt measures designed to increase coverage.

Mhair Dekmezian (L) *No response received.*

STATE REPRESENTATIVE DISTRICT 135

Gary Elkins (R)
Trey Fleming (D)

No response received.

I consider health care in Texas to be a right of our citizens and am in favor of mandatory state coverage for all children under the age of 19. I would like to see health coverage linked together with our public education system, especially for preventative health care and routine check ups. I also think our schools (and some are doing so) should take a more active role in managing a child's diet and amount of exercise each school day. As for adults, I'd like to see more of a mandated basic health insurance program but also allow for some level of choice between private and public offerings.

I think the current system is extremely regressive in that those without the corporate based career do not have the options to be part of a large scale health plan that would afford them the same level and quality of delivery as their neighbor. Those that have to go for publicly funded healthcare options today spend a large majority of their time painfully on hold in the waiting area - some for 8 to 12 hours at a time. I firmly agree with the idea that effective prevention must be emphasized and that basic preventative check ups should be covered by the state. While we cannot afford to offer the same level of coverage that one might receive currently under a PPO, the basic coverage I mention above would be a good start. If we can simply get folks to the doctor for check ups and allow the health care professionals the chance to advise patients as to the proper way to maintain a healthier lifestyle, it would be a good step in the right direction. It seems that we should work to find a way to fund 1 to 2 personal check ups per year and leverage automated medical records to track patient progress.

We need to ensure that our medical research facilities/organizations in Texas have the means necessary to conduct ongoing research in this area. We should also (and we may already do this...) incent through grant awards the philanthropic pursuit of medical discovery. We need intensive focus on root-cause analysis to better understand why the socio-economic status disparity exists. We have spent quite a bit of money in the past on campaigns such as "just say no" and "don't mess with Texas" and others of the like. This may be another area where a similar campaign could be quite effective, especially if the goal is to put the issue on the minds of Texans more than it is today.

If we could build a partnership between the public and private sector, supported by appropriate preventative health care initiatives mentioned above, it seems to me that we could get much better visibility in the marketplace about cancer. Certainly the Susan G. Komen foundation has made great strides in this area. If we can create the awareness and folks know that they have 1 or 2 check ups a year courtesy of our state preventative healthcare program, we might be able to catch early warning signs of cancer and treat some forms much more effectively.

Alfred Montestruc (L)

No response received.

STATE REPRESENTATIVE DISTRICT 136

Gerald LaFleur (L)
Beverly Woolley (R)

No response received.

No response received.

STATE REPRESENTATIVE DISTRICT 137

Alex Cresswell (R)
Scott Hochberg (D)

No response received.

No response received.

STATE REPRESENTATIVE DISTRICT 138

Dwayne Bohac (R)
Virginia Stogner
McDavid (D)

No response received.

That Texas ranks number one among the states with the highest number of uninsured residents is a real embarrassment and a sad indictment on a lack of responsible leadership in our state. I have flown with countless patients from around the world who were coming to the Texas Medical Center for the best medical care in the world, and it's a real shame that nearly one in three of the critically ill in Harris County, approximately 30%, cannot access that excellent health care because they have no insurance.

It is important that Texas access all federal funds available to improve the health of our citizens, most specifically our children. By November, 2006, the state had left \$832 million in Children's Health Insurance Program funds in the federal budget to go to other states. That money could have been used for the children of Texas, but the Legislature did not want to appropriate the dollars required to draw down 2.63 times that amount in matching funds. I advocate simplifying and clarifying the application and renewal forms and instructions for CHIP eligibility and making the forms more accessible for those who need to apply for coverage.

The health care industry is a \$ 2.5 trillion dollar beast that won't be put on a diet without serious repercussions. Millions of Americans are employed in this industry, whether they're a direct health care provider or not. Americans spend \$ 7,300 per capita on health care, and that includes the uninsured. The USA spends roughly 16% of its GDP on health care, and the next industrialized country that comes anywhere close is France at 10%. Serious restructuring of our health care system will not cost us more. It should cost us less when we remove the serious inefficiencies in the system, but some people will lose their jobs when we remove part of the bureaucratic administrative machine that bloats these health care costs like a serious case of gangrene! If you're out of medical school and have completed your residency requirements to set up private practice, the first two individuals you have to hire are medical billing specialists, NOT nurses. This may seem strange coming from an accountant, but we need to streamline some of these pencil pushers!

I find many of the proposals within the AMA plan to restructure our health care system to have strong merit. I am, however, not a fan of providing tax subsidies to for-profit insurance companies. I am a firm believer in a single payer system that cuts out most of the middlemen & women, but I believe that a "universal system" is one we will need to grow into. Following are my specific proposals to expand access to health care services, reduce costs, and still provide choices for patients and health care providers:

1) Provide a public option in the form of a County Coverage Plan

The Harris County Hospital District and Federal Qualified Healthcare Centers are already providing care to the uninsured through public means and on a sliding-scale based on income. This program could be expanded and a "public coverage" plan offered. The program could be voluntary until someone shows up for services, and then mandatory (based on family income) from the point of services forward. The patient can have several options for paying their monthly premiums, including a notification to their employer (only indicating that someone from the company showed up for services) and setting up payroll deductions (for companies with 15 or more employees).

2) Provide a private option in the form of physician and hospital cooperatives

I am in favor of the formation of hospital and physician cooperative by which a General Practitioner teams up with specialists and other health care professionals, and "premiums" are sent directly to the cooperative. The only time indemnity would be involved would be if the patient is outside the service area and needs medical treatment and outside providers need to be reimbursed. In such an event the national "Medicare for All" could come into play if a small premium were paid to Medicare to cover catastrophic events when the patient travels outside the jurisdiction of the cooperative.

The last Texas legislative session passed a \$ 15 billion dollar bond proposal toward cancer research & development to find cures and treatments for cancer, without addressing the fact that one out of three Texans will not have access to those publicly financed treatments or cures.

Our research institutions in the Medical Center are very successful in obtaining research funding from private foundations and through the National Institute of Health, and the many of the research projects address health disparities. The problem is access to care for those with lower incomes who lack health insurance. They do not get routine exams or tests for early detection of cancer such as colonoscopies or mammograms, so when cancer is detected, it is more likely to be at a later stage when treatment options are limited and the chance of survival is reduced.

The most significant progress toward cancer diagnosis and treatment will come as the result of a higher percentage of individuals having health care coverage which makes regular physical examinations and screenings through a primary care physician affordable.

I look forward to serving in the Texas Legislature as a true advocate for health care reform that benefits ALL Texans, regardless of income or socioeconomic status!

STATE REPRESENTATIVE DISTRICT 139

Sylvester Turner (D)

No response received.

STATE REPRESENTATIVE DISTRICT 140

Armando Lucio
Walle (D)

No response received.

STATE REPRESENTATIVE DISTRICT 141

Richard Brown (L)	<i>No response received.</i>		
Michael Bunch (R)	CHIPS already exist I would expand it.	By providing more health warnings on radio and TV.	Better public health notices.
Senfronia Thompson (D)	<i>No response received.</i>		

STATE REPRESENTATIVE DISTRICT 142

Harold Dutton Jr. (D) *No response received.*

STATE REPRESENTATIVE DISTRICT 143

Ana Hernandez (D)	<i>No response received.</i>		
Joe Marcom (L)	As a Libertarian, I believe that there are few problems in life that can't be made worse though government involvement. I am convinced that the cost of insurance coverage would be greatly reduced by eliminating or reducing the bureaucratic paperwork now required. Tort law reform to lower the cost of malpractice insurance for doctors is another means I support, though I do not personally know how to accomplish this. I do not have any child-specific suggestions.	I consider the present health care system to be a "mess", largely because of over-regulation by government at all levels, and by allowing non-physician administrators to dictate medical treatment plans. I would get government out of the insurance business altogether, and let private companies manage things.	Again, health care is not a proper exercise of government authority, though I could accept Public Service announcements. For the indigent and others who are without any other means of care, I believe a system similar to the military system of providing routine medical care could be established at the local level; however, this would necessitate finding a way to avoid "turf wars" among the various health care professions. This, along with the fear of malpractice suits, is a major stumbling block toward providing greater medical coverage. If elected, I would pursue a solution.
Dorothy Olmos (R)	If there are policies in place and I plan to do more research to educate my mind as to what is in place and in doing so I have a concept that I do think would work. That is to allow small business owners, construction contractors to pull together and create a Texas Ins. Poole to allow those individuals who are self employed gain an opportunity to seek health insurance and pay into the poole. At the end of the year these small business owners can have an additional tax break for themselves as well as their families. And parents who have Medicaid for their children should also receive immediate health care if they are self employed or on a Base gov't pay scale that can be monitored and be made accountable for the state.	If the Ins. Co's receive tax breaks due to the allowance of providing a poole for small business owners, then I do believe that it would be a win for all, and it would go through the State as a registered Poole and the state could receive a 1% revenue for the poole of insurance. That 1% could go back to the Medicare Medicaid revenue and then the health care system can begin to flow with revenue payments back to doctors who accept Medicare Medicaid and Self Care Health Ins. That would be a name that I would propose to the State legislature to pass this bill concept. As professional medical doctors it is a must to go into the churches of needy neighborhoods and educate the people to advocate for this new (concept bill) to begin prevention and healthy lifestyles in the state of Texas.	First target the communities near the environmental air qualities, refinery industrial areas, especially in my Dist. 143 near the Port of Houston and begin the research of many individuals in those communities who have been affected by critical illness and then acquire funding for the research. That is what I propose to do if elected. I would hold the refineries accountable by allowing them to pay into research for a tax break and hold them accountable for E.P.A. standards.

STATE REPRESENTATIVE DISTRICT 144

Ken Legler (R) *No response received.*
Joel Redmond (D) *No response received.*

STATE REPRESENTATIVE DISTRICT 145

Carol Alvarado (D) *No response received.*
Patricia Rodriguez (R) *No response received.*

STATE REPRESENTATIVE DISTRICT 146

Al Edwards (D)	CHIP and Medicaid are a couple of the policies that I have always supported for uninsured individuals. I would adopt a policy of statewide free child health care system for disadvantage families with economic problems. This would address the health care coverage for children from the age of new born to 18 years old.	It is understandable that the majority of Americans are dissatisfied with health care costs and delivery but the situation is improving. Each year more services are being provided for more individuals. We are attempting to provide health care for everyone who needs it. That is not an easy job. To improve health care delivery in Texas and the United States, I support national health care. The role of private insurance companies would be to provide quality care. To emphasize prevention and healthy lifestyles in our state more funding to educate the citizens about healthy living, provide physical fitness programs, free yearly checkups, and mobile clinics and units for prevention and early detection.	As a state, we can support research into health disparities by increase funding along with a public education campaign. We can support efforts to improve cancer awareness, prevention, research, diagnosis, and treatment in our state by providing access to quality health care, public education campaign, providing transportation to sites, providing mobile clinics and units for early detection, and by providing community involvement.
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STATE REPRESENTATIVE DISTRICT 147

Garnet Coleman (D)	<i>No response received.</i>
Joe Tirado (R)	<i>No response received.</i>

STATE REPRESENTATIVE DISTRICT 148

Jessica Farrar (D)

It's common knowledge within the medical community that investing in preventive health services saves money and suffering in the long run. Texas needs to allocate more funding for access to preventive health care and treatments for the segments of our population that lack private health insurance and those that are underinsured. Increased funding for CHIP, including a reinstatement of all of the funding that has been cut in the last few years as well as a general increase, will help working and middle class families provide coverage for their children. Increased funding to public clinics and hospitals from the state will allow more adult individuals to remain healthy and also treat existing conditions without clogging our emergency rooms and forcing people to become deathly ill before they qualify for care.

Our current health care system is inadequate, to say the least. It's an example of the haves vs the have nots, and most of the people in Texas find themselves in the second category. Even those individuals with private health insurance find that many times their co-pays and other out of pocket expenses render their coverage almost useless. This goes to show that state and federal governments need to take more responsibility in regulating the insurance industry, which has one of the best funded and most powerful lobbies in the country. In Texas, insurance companies have been allowed to repeatedly cut back on the coverage they offer through their plans while consumers continue to pay higher and higher premiums for this sub-standard coverage. Texas also makes it virtually impossible for lower-income working families to obtain public assistance, which means that many people go without care until they are critically ill and can't work. Many times they rely on emergency rooms as their primary care providers, which means the price all of us pay goes up. Making preventive health care available and affordable to all segments of the population will result in healthier Texans that need less invasive and costly treatments, and that will mean less cost for all of us. In addition, the state needs to allocate more funding to schools so they can provide real physical education and activities, as well as healthier food choices. This is especially important given that for many children, the meals they receive at school are the most significant of their day.

Texas has a responsibility to invest in research into health disparities simply because we are one of the poorest states and we have a large minority population, and these are segments of the population most affected by certain health problems. It goes back to investing more funding in health care in general and realizing that research and implementing programs based on solid research will lead to a decrease in the development of certain diseases and the need for treatment of these diseases. Prevention and/or early diagnosis is cheaper and better for the patients and the state than what we are doing now.

In order to specifically improve cancer awareness, prevention, research, diagnosis, and treatment in Texas, we have to educate our communities in ways they understand. We have to make the information easily accessible, we have to meet the individuals where they are at, we have to put the information in terms and languages they can understand, and we have to follow that with actual access to screenings and further care when needed. We need to make it easier and less expensive for people to go to the doctor when something is wrong as well as *before* something is wrong.

Howard Gano Jr. (R)

I was reading the Greater Houston Partnership's Public Health Care Task Force Report. I would like to see CHIPS administered on the local level (i.e Harris County) and would like to see that more uninsured children could be eligible for the program. I would think that the school districts could also do a lot of informing the parents about the availability of CHIPS and the eligibility requirements. It would be great if Harris County and the City of Houston could work charity and philanthropic organizations to provide a low cost (catastrophic) medical insurance policy to all that need it.

Again, I think this can be better tackled at the local level, but supported by the state. As a CPA and a believer in the free market it should be noted that good medical care is not inexpensive and should not be free. The patient could do a lot to bring costs down if hospitals would provide patients with a detailed bill of the services and charges, which would need to be approved by the patient, before rendering it to the insurance company for payment. When the hospital charges \$100,000 and the insurance company pays \$40,000, there is something wrong with the system. I think that our school systems and community organizations which would include hospitals can do more to educate people about healthy lifestyles and prevention.

Again, we should not wait for the state or federal government to solve these problems. We should begin here in Houston and Harris county. I would like to see a coalition of business, community service organizations, and the medical center open up some free 24 hour clinics to service the uninsured and the people in need. These clinics would require some kind of donation from the patient for the services, but it would be up to the patient to decide. Part of the services could be cancer awareness and screening. Your organization could help create these clinics.

STATE REPRESENTATIVE DISTRICT 149

Greg Meyers (R)

No response received.

Hubert Vo (D)

No response received.

STATE REPRESENTATIVE DISTRICT 150

Brad Neal (D)

No response received.

Ken Petty (L)

No response received.

Debbie Riddle (R)

No response received.

LOCAL ELECTIONS

Questions proposed to our local election candidates

The Harris County Hospital District provides care to individuals living in our community without other health care resources. With over 1 million uninsured people living in Harris County – would you allocate more resources to the Hospital District? How would this money be raised? What do you propose to specifically reduce wait times and increase services within the Harris County Hospital District?

The majority of Americans (81% in a recent survey) are dissatisfied with health care costs and delivery. What are your opinions of our current health care system? What do you propose to improve health care delivery in Harris County and Texas? What can we do to emphasize prevention and healthy lifestyles in our community?

Mental health services are extremely limited in our community. Over two-thirds of children in need of mental health care in Harris County are not receiving adequate care due to a lack of resources. Do you feel that we need to expand publicly and privately funded mental health care resources? If yes – by what means?

COUNTY JUDGE

Ed Emmett (R)

The lack of a national immigration policy imposes an undue burden on Texans. In the meantime, we should treat each person presenting for care without regard to their immigration status. I am committed to improving health care access for prevention and primary care. I am supportive of innovation to enhance access through more community sites (HCHD and FQHCs). I am not in favor of new major capital expenditures such as building hospitals.

Our system clearly needs to be improved. We need to be open to change, for example, Should we tolerate a two tier system of care here in Harris County, where the un-insured generally go to BTGH or LBJ (HCHD), different from the insured? Could we privatize hospital beds and expand primary care access? Why should the vast amount of our resources go to the hospitals? The expansion in healthcare most needed is in access for prevention and primary care.

I am focused on solutions at the County level but believe to improve health outcomes we must focus on the behaviors that impact health.

David Minberg (D)

I have provided to Harris County residents a free prescription discount card for anyone lacking healthcare insurance resulting in a 20% discount for pharmaceuticals.

If elected, I will work with Commissioners Court to accomplish the following items:

1. Appointments to the HCHD Board of Managers will be based on qualifications and the skill set needed to properly run a medical institution, using the systems in place in San Antonio and Dallas as models.
2. HCHD leadership will be encouraged to work with the Harris County Healthcare Alliance to develop an effective overarching policy for the uninsured and under-insured.
3. As County Judge, I will fight for our fair share of funding from the Texas Legislature.

I will help work towards a system that allows for hospitals to share pertinent patient medical records and help navigate the legal barriers related to the sharing of medical information for improving patient care.

Our current county hospital system is designed to treat 300,000 people per year while the demand for care from the universe exceeds 1 million people. We must develop a long term solution to promoting preventive care so that individuals do not depend on the hospital emergency rooms for basic needs. Diagnosing diabetes in the early stages can help prevent the progression of uncontrolled diabetes and help empower patients instead of depending on the emergency rooms for crisis care. I will help work to create capacity in the county with the quad agencies, FQHCS and other clinics to enhance patients' ability to access care.

In addition, I will work with the quad agencies, the Harris County Public and Environmental Services Dept, the City of Houston Health Dept, the MHMRA, and the Harris County Hospital District, to streamline our efforts. One example is quad eligibility. Patients should be eligible for all 4 lines of service when they complete one application. This solution would circumvent the problem of an arduous and unpredictable application process. We must plan for the future in an effort to most effectively allocate the resources at our disposal.

This is an issue of access. Since the very structure of the Harris County Hospital District is a barrier system, many restrictions are preventing people from receiving treatment, because of its limited capacity. We must design a system that promotes preventive care for all members of our community, in an effort to reduce the strain on our resources. Preventing serious illnesses before they progress will ultimately benefit us in the long term.

For example, individuals with mental health problems find the best care while incarcerated. When they are released from the Harris County jails, they are left without follow up care. There should be coordination between the Harris County Sheriff's office and the Harris County Hospital District and MHMRA to ensure continuity of care for these individuals before they are released so they have a better chance of receiving the proper treatment and ultimately participating as productive members of our community.

We need a county judge with a long term vision for Harris County so that all citizens of our region lead safe, healthy lives for years to come.

COUNTY COMMISSIONER: PRECINCT 1

El Franco Lee (D)

No response received.

Jorgen Nelson (L)

No response received.

COUNTY COMMISSIONER: PRECINCT 3

Dexter Handy (D)

I favor allocating more resources to the Hospital District. We have over 1,000 new residents arriving into Harris County each month. We need a robust and thriving county hospital system to accommodate this growing population. We need to take advantage of the federal government programs (including CHIP) to fund the expansion. If necessary, I favor bond initiatives to raise funds for additional hospital infrastructures, including satellite clinics. The satellite clinics need to be expanded to eliminate the overwhelming use of the hospital emergency rooms for non life-threatening visits. We need to put more local clinics in the communities, and educate the patient population on the availability of those clinics. If possible and practical, we need to put in place a network of hospitals and clinics which shortens the emergency wait from nine hours to thirty minutes.

Like most Americans, I believe our current health care system is broken. When 30% of Harris County residents are uninsured, something is dangerously wrong! It appears as though only the healthy can maintain affordable insurance. Employers cannot keep up with the costs of insurance. Individuals do not always have the ability to transport their plans when changing jobs or companies. The rules, fee structures, and drug policies appear to frustrate both physicians and patients. Texas, with its tax revenues from energy industry profits, should establish an optional state-funded health insurance program for working class adults and their children. This plan needs to be worked out between physicians, existing HMOs, drug companies, and patient advocates. It needs to address adequate coverage for chronic/long term illnesses and injuries, as well as catastrophic illnesses and injuries. It needs to address competitive fee schedules, co-payments, and wellness initiatives (specifically, it needs to provide incentives for citizens to maintain healthy life practices – through community education and outreach programs run by an expanded clinic system). And it needs to be affordable. I strongly believe that physicians must lead this initiative. We need to put the needs of the patients first.

We absolutely need to expand publicly and privately funded mental health care resources. Today, some of the county's jailed population may actually be mental patients. Children in need of such care should get it. The state of Texas has not adequately funded mental health/mental retardation programs of recent. The change needs to start at the State legislative level. Funding must be increased, and more programs must be established locally from that funding.

Steve Radack (R)

No response received.

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