

October 1988

ONE SECTION

© 1988 Liberty Media Inc.

The Newspaper for Dallas Residents  
in the Prime Of Their Lives

## Thank you

To those of you who subscribed to *SR Dallas*, welcome aboard. It's going to be a great year.

If you have not subscribed, your free monthly subscription will come to an end shortly. To ensure continued delivery to your home each month, please see Page 2.

## INSIDE



### 13 Fashion flair

Mature women are setting the style in the workplace today, a noted fashion authority says.

### 16 Happy trails

The 10 best walking trails in the Dallas area are guaranteed to offer more autumn per mile.



### 23 Marco Island

Paddling through the mangroves is only part of the lure to this fabulous Florida resort.

# Campaign maneuvers

## Issues on backburner in presidential race

By Herbert P. Weiss

In 1900, when William McKinley was president, about one in 10 Americans was age 65 and over. By 1986, well into Ronald Reagan's second term as president, one in five Americans was at least 55.

But the dramatic increase in an age group that marches to the polls in numbers heavier than any other is largely being ignored in a presidential campaign that is gearing into its final month.

Sandwiched between negative campaigning on family wealth, income, military records and levels of patriotism, candidates George Bush and Michael Dukakis hotly debate issues of defense, environment and the economy. Meanwhile, debate on long-term health care, Social Security, alternative housing and other issues of sharp interest to mature citizens is minimal at best.

"So far as the presidential campaign is concerned at this point it's all gone haywire," observes Henry Phillipsborn, chairman of the American Association of Retired Persons State Legislative Committee in Dallas. "My personal view is that it's a nasty campaign that has gone off track."

Edna Hart mirrors the view. "I agree completely. It's just gotten ridiculous," says the former member of the Dallas delegation to the Texas Silver Haired Legislature and veteran campaigner on behalf of aging issues.

"All they've done so far is call each a wimp and other names. They're not addressing issues. People are concerned



about long-term care and the catastrophic bill and the things it didn't cover."

Phillipsborn and others concerned with the early tenor of the campaign say they are hoping as the November election nears, the candidates will begin addressing issues pertinent to a constituency that has a solid record of participation in national elections.

"There just hasn't been much to it so far," says Daphne Hardwick of the Gray Panthers of Dallas, whose intergenerational programs focus on issues

of interest to all age segments.

"Perhaps it will change once they get into the debates," suggests Phillipsborn, whose surveys indicate long-term health care to be the top national issue among people 50-plus.

In 1986, more than 29 million of the 178 million Americans of voting age were at least 65, according to the U.S. Bureau of the Census, and 20 percent of those casting ballots in the midterm congressional elections were older voters.

See NAME, Page 15

## CENTERS AIM FOR EMPHASIS ON ACTIVITIES

(Continued from previous page)

Baylor is actually a latecomer, though. The oldest of the three Dallas providers is Town Hall Adult Day Care at 226 East 10th St. in Oak Cliff. It's been in business since 1984.

Another option, Scenario Adult Day Care & Health Services, was opened by Elizabeth Perez, R.N., two years ago.

## NAME CALLING MUDDIES ISSUE FOR CANDIDATES

(Continued from Page 1)

In the last four national elections — 1980, 1982, 1984, 1986 — persons in the 55-64 and 65-74 age groups participated more in elections than any other age bracket.

Through the efforts of AARP's non-partisan voter education campaign program and other sources, both Bush's and Dukakis's positions on several key issues of interest to mature people have been compiled from statements and speeches, providing a general picture of their positions.

**At a glance,** Bush supports increased research funding to eliminate the major causes of long-term chronic disability and would like to make Medicare and Medicaid more flexible to assist older citizens to stay in their homes. Bush believes the private sector initiatives such as long-term care insurance and IRAs should be part of the solution to finance costly long-term care.

Dukakis also supports keeping mature citizens in their homes. As governor of Massachusetts, he strongly supported funding of home health care and chore services.

**On Social Security issues,** both Bush and Dukakis support a solvent Social Security program.

In 1983, Bush made a tie-breaking vote to support the Dole-Domenici amendment to the Budget Resolution to delay the increase of cost-of-living adjustments (COLAs) for Social Security recipients. The Democrats may choose to bring his vote up during the final days of the campaign, labeling it an anti-elderly vote.

**Catastrophic care legislation** drew support from both Bush and Dukakis.

They recognize the need to curb the cost of the Medicare program without reducing the quality of care to the elderly. Both support the option of older adults enrolling in plans such as Health Maintenance Organizations and Preferred Provider Organizations. ■

Herbert P. Weiss, a former Dallas resident, is based in Gaithersburg, Md., and frequently writes on national issues pertaining to mature people. He is a former Washington correspondent for Contemporary Long-Term Care and editor of Aging Network News.

Scenario is at 2929 Bachman Lake Drive.

New or old, each provides an alternative for caregivers running low on time and energy. The problem is far from rare.

One of eight nursing home residents interviewed in a National Center for Health Statistics survey indicated the patients were in the center because there was no one besides a single caretaker at home to provide care. Nearly one of four were in nursing homes because they needed more care than could be provided at home. Only 36 percent were in nursing homes because of a medical condition, the study found.

Town Hall is a non-profit corpora-

tion owned by an interdenominational religious group called American Religious Town Hall. The same group has another center in Grand Prairie.

The Oak Cliff center is in a remodeled house in Oak Cliff. Its hours from 7 a.m. to 5 p.m. are set up to allow caretakers to drop off charges in the morning and pick them up after work. To make it easier, Director Tony Chong provides door-to-door transportation via the center's five vans.

Scenario, which serves primarily the North Dallas area, is located in a former restaurant. It is open later than the others, until 7 p.m.

Since it's connected with the hospital, Baylor's healthcare offering is strong.

The staff includes a social worker specializing in geriatrics, a nurse, dietitian, chaplain and occupational therapist. In addition, the program is overseen by Dr. Robert Fine.

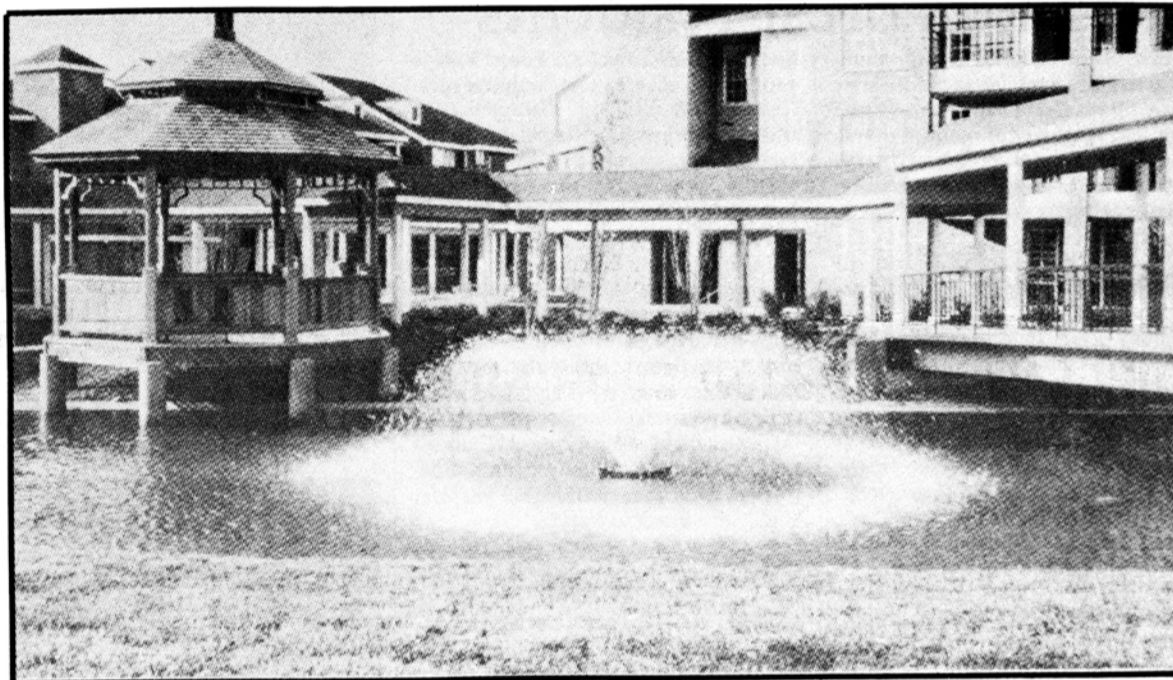
One of Baylor's most popular programs mixes old and young. Each Friday, a group of 4-year-olds from the hospital day-care center comes to visit.

"Kids can get people to respond in the most natural way," explains Director Deborah Allison. Patients find children more honest, more ready to touch and hug and able to offer important contact with a different generation. ■

Mark Henricks is an Irving-based free-lance writer.

# Chambrel

AT CLUB HILL



## GRACIOUS LIVING HAS COME OF AGE!

If you're ready to enjoy the freedom of retirement living . . . You owe it to yourself to take a close look at Chambrel where you can rent a luxury apartment for \$990.00. Included in your monthly fee are all utilities (except telephone), housekeeping and linen service, transportation, planned social activities, fitness center/whirlpool, security, 24-hr. emergency response system, delicious meals served in Chambrel's Club Restaurant, and much more.

**For Your Personal Tour Call 214-278-8533 or mail the bandy coupon**

1635 (LBJ) to Centerville  
Rd. Exit North. Right on  
Broadway Blvd. Left on  
Colonel Dr.

M-F 9-5, Sat 1-5, Sun By Appt. Only  
1245 Colonel Drive  
Garland, Texas 75043

Chambrel  
AT CLUB HILL

**Yes!** I want to know more about  
Chambrel. Please send me  
more information.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_

An Oxford Senior Living Community SR 10/88

By Herbert P. Weiss

Within the banks of the Potomac River, surrounding Washington, D.C., senior organizations operate their national headquarters, developing policies and directing programs that have a direct impact on the lives of millions of Americans.

The following list of national senior organizations are but a small sample of those whose programs are geared to serving the interests of older people:

**AARP 28 million strong**

**American Association of Retired Persons**, 1909 K Street, N.W., Washington, D.C. 20049. 202-728-4300.

Founded in 1958 by the late Dr. Ethel Percy Andrus, AARP is the most visible and with a membership of more than 28 million, considered the largest organization for older Americans. AARP has developed an effective national lobby representing its membership in the areas of Social Security, pensions, taxes, health-care reform, social service programs, civil rights, consumer issues and employment.



Member services include discounts at major hotel chains and car rentals, mail order pharmacy services, investment programs, travel services, AARP Motoring Plan, group health insurance and auto-homeowners insurance. Audiovisuals are available for loan and AARP books can be purchased. More than 140 publications — from practical "how-to" guides to demographics and resource books — more than 3,700 AARP chapters and 2,500 Retired Teacher Associations nationwide provide opportunities for service and fellowship.

Membership dues are \$5 for one year, \$12.50 for three years and \$35 for 10 years, including Modern Maturity magazine bimonthly and the AARP News Bulletin 11 times a year. Dallas serves as Area VII headquarters for AARP with offices at 8144 Walnut Hill Lane, Suite 700. 361-3060.

**Alliance of ages**

**Gray Panthers**, 311 S. Juniper St., Philadelphia, Pa. 19107. 215-545-6555; Washington office — 1424 16th St., N.W., Level 1, Washington, D.C. 20035. 202-387-3111.

**A look at the support groups**  
National organizations offer a variety of services

The Gray Panthers, founded 18 years ago, continues its struggle against poverty, inadequate health care and inadequate housing and nutrition. Nationwide, there are more than



70,000 Gray Panthers in more than 80 local chapters, including Dallas, who have helped to alleviate housing problems faced by

older people.

In Washington, the Gray Panthers lobby to expand health-care problems, oppose cuts in Medicare and Social Security, and support legislation expanding the rights of older and disabled citizens. The group prides itself on being intergenerational. Through an alliance of young and older members, the Gray Panthers support world peace and nuclear disarmament.

Membership is open to all ages. Membership is through contribution. The organization's publication, Network, is provided to individuals who contribute more than \$12. In Dallas, information about the Gray Panthers can be obtained by calling 827-1181.

**Federal retirees**

**National Association of Retired Federal Employees**, 1533 New Hampshire Ave., N.W., Washington, D.C. 20036. 202-234-0832.

NARFE is the only organization whose primary objective is to protect the interests of people eligible for civilian retirement from any agency of the federal government. NARFE,



founded in 1921, monitors legislative proposals before the Congress in the areas of retirement income, survivor benefits, health care, life insurance, taxes and consumer protection. The organization's

political action committee (NARFE-PAC) and its 1,700 local chapters give it a powerful voice on Capitol Hill.

Membership is open to people retired from federal civil service and their spouses; individuals with five years of vested service; and survivors of deceased federal workers. Dues are

determined by age. NARFE's monthly magazine, Retirement Life, goes to all members. In Dallas, additional information about NARFE can be obtained by calling 243-8318.

**Nursing home watchdog**

**National Citizens Coalition for Nursing Home Reform**, 1464 16th Street, N.W., Suite L-2, Washington, D.C. 20036. 202-797-0657.

NCCNHR's membership strives to improve the quality of care and life for nursing home residents and provides a consumer voice in



Washington on nursing home policy. NCCNHR was founded in 1975. More than 300 local and state member groups and 500 individuals in more than 45 states work to support

nursing home reform by promoting community involvement with nursing homes, intervening to resolve individual complaints and problems, working with health-care professionals to improve patient care, monitoring regulatory activity at the state and federal levels to generate effective government oversight on nursing home regulations, and supporting initiatives fostering nursing home resident and family empowerment.

Organizational (\$35-\$300 depending on annual budget) or individual (\$2 for nursing home residents, \$10 for people 65-plus and \$35 all others) memberships are available. Benefits include a 20 percent discount on NCCNHR publications, discount on registration fees for the group's annual meeting and consultation services. Group members receive Action Alerts on long-term care issues. NCCNHR's bi-monthly newsletter, Quality Care Advocate, is available to all members.

**Council of seniors**

**National Council of Senior Citizens**, 925 Fifteenth St., N.W., Washington, D.C. 20005. 202-347-8800.

NCSC is 17 years old and one of many senior organizations that fought for the enactment of Medicare. NCSC comprises 4,800 clubs with a

membership of 4.5 million. At the federal level, NCSC supports federal funding for senior centers, nutrition sites, community employment projects, low-income senior housing and social service programs. At the state-level, it lobbies to prevent physicians from



charging more than the Medicare-assigned rates and favors increased access to nursing homes and strict enforcement of nursing home regulations. It also supports the creation of "lifeline" utility rates and lower prescription drug costs for Medicare patients.

Membership is open to anyone 50-plus. Dues are \$12 individual; \$16 family. Benefits include group rates on supplemental insurance, in-hospital insurance for people under 65, automobile insurance, money-saving prescription drug service, senior travel and tour services.

**In service to women**

**Older Woman's League**, 730 Eleventh St., Suite 300, N.W., Washington, D.C. 20001. 202-783-6686.

OWL, founded in 1980, is the first national grassroots membership organization to focus exclusively on women as they age. OWL has implemented a national campaign to educate policy makers and the public on health care and aging issues from the viewpoint of older women. OWL has developed model state bills on health insurance conver-



sion rights and on respite services for caregivers. OWL has promoted education programs on death and dying to assist women in handling decisions on life support and funeral arrangements. OWL's Gray Paper series on pensions, older women and employment and other issues of concern to older women are available.

Membership is open to anyone concerned about issues impacting older women. Dues are \$10 and includes Owl Observer, a bi-monthly newsletter. Efforts are under way to organize a Dallas chapter of the OWL. Contact Sylvia Houglund for additional information, 437-4520.

Herbert P. Weiss is former Washington correspondent for Contemporary Long-Term Care and editor of Aging Network News.

**Frustrated ?**  
We can show you how to deal with the problems of removable dentures



**DENTAL IMPLANTS** can leave the embarrassment, inconvenience, and discomfort of loose fitting dentures behind.

**Fred E. Thompson, D.D.S.**  
General & Implant Dentistry  
(214) 226-6945

Active Member of American Academy of Implant Dentistry  
Dr. Thompson is currently offering a complementary consultation

**STATE DIGNITARY**

You are cordially invited to join us in welcoming the migrating U.S. bald eagle delegation to Oklahoma State Parks. The blue skies are being rolled out in special Eagle Watch ceremonies honoring the beauty of these aviary VIPs. Comfortable attire required. Binoculars optional.



**DATES:**  
November 1988 — March 1989  
**PLACES:**  
Quartz Mountain Resort and State Park.

Beavers Bend State Park  
Great Salt Plains State Park  
Green Leaf State Park  
Tenkiller State Park  
**RSVP:**  
1-800-652-6552  
for specific Eagle Watch schedule and reservations.



Arrival dates and length of residence are approximate and will vary by location.

## January 1989

ONE SECTION

© 1988 Liberty Media Inc.

The Newspaper for Dallas Residents  
in the Prime Of Their Lives

### INSIDE



#### 6 Family tree

Marianne Williams doesn't take her Christmas tree down. She just redecorates it.

#### 8 Whistle stop

Model railroading is more than a hobby for father and son, Jack and Tom Leming. It's tradition.

#### 14 Vintage trip

Raise a glass to California's beautiful Sonoma Valley, a unique balance of past and future.

#### 19 Family affair

Marta Marie Caillet's family was saving the wildflowers long before others took up the cause.

## SPECIAL REPORT

### HEALTH

#### 2 Insurance chart

#### 5 Reader reaction

#### 13 Great outdoors

#### 16 The HCFA report

#### 18 Osteoporosis scan

## 101st Congress: *Legislators sitting down to full agenda of mature issues*

By Herbert P. Weiss

"We may have lost this one battle, but we'll win the war."

So says a legislative aide of Rep. Claude Pepper (D-Fla.) in assessing both the past and future of the veteran lawmaker's long-term health care bill. Pepper's bill was among more than 30 long-term care financing bills introduced during the last session of Congress. None passed.

Fiscal cost and procedural concerns of the House Democratic leadership played a major role in thwarting the proposals. However, Pepper's staff suggests far-flung support of the initiative will carry it into the 101st Congress.

"This was the first vote in the history

of Congress on long-term care," the aide explains. "The 140 national organizations that supported this bill will ensure that a meaningful long-term care bill will be considered next Congress." Accompanying the examination will

be a prolonged debate to sort out a consensus of funding, a determining factor in many of the legislative proposals failing passage during the 100th Congress.

At a glimpse, a controversial catastrophic care bill was enacted; the Older American Act of 1987 was reauthorized; the Omnibus Reconciliation Act of 1987 was enacted which included nursing home and health care reforms; and federal funding was increased for Alzheimer's research and a health and human service appropriation bill.

But a score of issues affecting mature Americans was left on the table for the Bush Administration and the 101st Congress. For example:

### Quest for Best

Help! We're needing mature judgment in our first annual readers' "Quest for the Best" poll.

SR Dallas, KAAM/1310-AM and Southwest Airlines want you to tell us about the people, places and institutions best serving the Dallas area. For complete details, your ballot is on Page 22.

## ACCUFIT™ 2000 EXERCYCLE FROM RALEIGH

**"TAKE THE RIDE OF YOUR LIFE"**

Raleigh's revolutionary new Accufit 2000 displays your pulse rate, speed, distance, time, calories and calories burned per hours as you exercise.

The comfortable earlobe pulse sensor accurately monitors the pulse from exercise start to finish. Helps avoid over-exertion and allows measurement of exercise performance during the workout.

Multifunction computer monitors pulse, speed, distance, time, calories, calories per hour and is programmable for time and pulse minimum/maximum limits. The scan function monitors all features continuously.

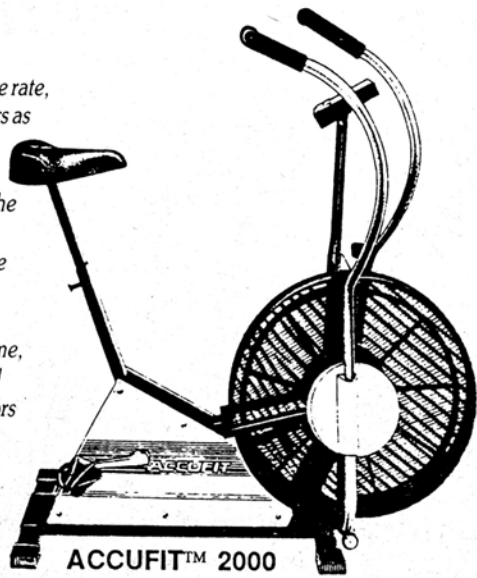
Large comfortable padded saddle has 13 secure height positions and micro-adjust tilt for the back.

The ergonomics moving arms may be utilized in a pedal with arms action or in an arms only action.

Quiet wind resistance tension and pedaling technology increases exercise effort as RPM's increase. No contact friction, mechanism to wear out. 24", 9-blade low-profile front mounted fan includes full perforated metal cover.

The wind resistance tension wheel locks for safety when exercycle is not in use.

Bottom weighted resin pedals include easy entry/exist straps.



ACCUFIT™ 2000

**SAVE \$90.00**

Was \$739.95 Now 649.95

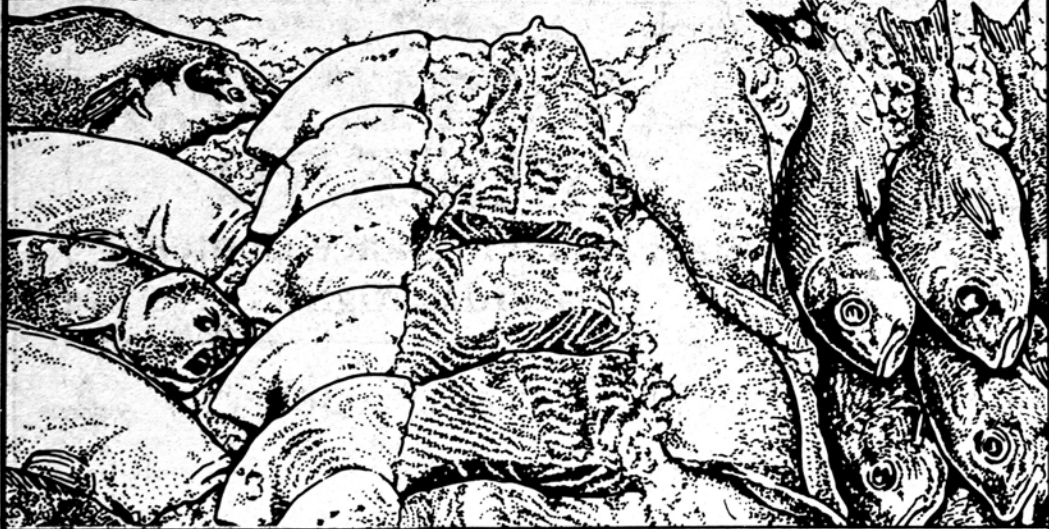
## BICYCLE EXCHANGE

1305 S. BROADWAY  
Old Downtown Carrollton  
242-4209

11716 FERGUSON  
Dallas • LBJ & Centerville  
270-9269

Major Credit Cards Accepted

## FAMILY EATS FRESH FISH AT SEA GRILL EVERY DAY FROM 5 TO 8 PM; SAVES ENOUGH FOR OCEAN CRUISE



**COMPLETE DINNERS FROM \$6.95\***  
**CURRENCY SEA GRILL**  
LOCATED IN  
DALLAS MARRIOTT  
PARK CENTRAL  
LBJ @ COIT ROAD  
**(214) 233-4421**  
\*Senior Citizen discount available

Everybody's talking about our great Early Bird prices on complete dinners here at the Sea Grill. Mainly because our regular prices were low to begin with.

After all, the Sea Grill features the freshest, most delicious seafood around—broiled, sauteed, stuffed with fresh crabmeat, or blackened cajun-style. And served in a casual, friendly atmosphere with reasonable prices.

And now, for a limited time, even better than reasonable.

CURRENCY



**SEAFOOD SO FRESH, PEOPLE ARE TALKING**

## LEGISLATION

### BUDGET PUTS PRESSURE ON LEGISLATORS

(Continued from Page 1)

**Catastrophic care.** Congress is already hearing an outcry from older constituents regarding the newly enacted catastrophic care legislation and protests are sure to rise in volume once it hits pocketbooks. The monthly Medicare Part B premium — including the new premium for catastrophic health care coverage — rose by 29 percent Jan. 1. Combined with other increases, monthly payments have risen nearly 80 percent in 13 months. The total monthly payment for Medicare today is \$31.90 a month. The payment in December 1987 was \$17.90.

Attempts might be made to modify financing catastrophic care, but a staff member of the House Select Committee on Aging states, "Prospects for changing it are slim. There is no easy way to change it."

**The notch babies.** "Notchers" will most likely bombard their representatives with a mail program asking for a correction in the Social Security formula. In 1977, Congress mandated a transitional formula be utilized to determine Social Security benefits for people born between 1917 and 1921. Because of this policy decision, the Social Security system remained fiscally solvent.

Benefits were reduced much greater than Congress intended. Instead of a gradual reduction in benefits of 6-10 percent over a five-year period, in many cases benefits were reduced 10-20 percent. Dan Rostenkowski (D-Ill.), chairman of the House Ways and Means Committee, and Andrew Jacobs (D-Ind.), chairman of the House Subcommittee on Social Security, opposed notch reform legislation in the last Congress. Look for them to continue a stance against any measures introduced in the 101st Congress that would jeopardize the fiscal solvency of the Social Security Trust Fund.

**Housing reform.** "There could be a real movement from the Department of Housing and Urban Development's mentality that we do bricks and mortar only," says Don Redfoot, legislative representative for the American Association of Retired Persons.

Sens. Alan Cranston (D-Calif.) and Alfonse D'Amato (D-N.Y.) released a bi-partisan concept paper on housing reform at the end of the 100th Congress. "The National Affordable Housing

Act, including many of the paper's recommendations, will be introduced during the 101st Congress for debate," Redfoot says. "One of the three major areas of this bill will be a supportive housing package that would integrate social services and housing for the frail elderly, disabled and homeless."

**Social Security.** Congress expects to seriously discuss the Social Security Trust Fund in relation to the federal budget deficit. Although the Social Security Program is considered off-budget, it is used to determine the Gramm-Rudman budget deficit targets.

A House staffer states, "The Social Security Trust Fund has been used by both parties to mask the real size of the budget deficit." According to the National Committee to Preserve Social Security, the 1988 Social Security surplus of \$37 billion, which was included in the Gramm-Rudman deficit calculation, creates the illusion of a \$157 billion deficit, when the real deficit will be \$195 billion for 1988.

**Rural hospitals.** About 600 of the nation's 2,700 rural hospitals are at risk of closure. The Prospective Payment System was established to give all hospitals an incentive to operate efficiently. However, this is not the case. Since 1980, 161 rural community hospitals have shut their doors because of inadequate Medicare Prospective Payments and the inability to recruit physicians, nurses and allied health professionals.

One quarter of the American elderly live in rural areas. With multiple chronic conditions, these individuals rely heavily on local hospitals. "The bottom line is fairness or payment equity," says Amy J. Schultz, government affairs consultant for the National Rural Health Association. "There is enormous support among the members of the 101st Congress for giving rural hospitals a fair shake."

**Medicare-Medicaid costs.** A Congressional Budget Office report projects Medicare and Medicaid to rise in cost four times faster than inflation between 1988 and 1993. The federal budget deficit along with the growth of Medicare-Medicaid will put more pressure on Congress to contain the costs of the programs.

A Housing Aging Committee staffer notes, "Physician reimbursement will be a hot item to look at. Reducing overpriced procedures will produce savings in Medicare Part B."

**Political strategies.** In the era of Gramm-Rudman, Congress will continue to debate aging and health care issues. Strategies for lobbying have changed to reflect the harsh fiscal realities of our time. Special interest groups no longer fight for larger pieces of the budgetary pie. They fight to hold their own.

Funding pilot programs and incrementally increasing existing programs may be more politically feasible during the 101st Congress than establishing new, large and untested programs and services. ■

Herbert P. Weiss is based in Gaithersburg, Md., and frequently writes on national aging and health care issues. He is a former Washington correspondent for Contemporary Long-Term Care and editor of Aging Network News.

### Window on life

*Adam and Eve had many advantages but the principle one was that they escaped teething.*

— Mark Twain

*Years may wrinkle the skin, but to give up interest wrinkles the soul.*

— Douglas MacArthur

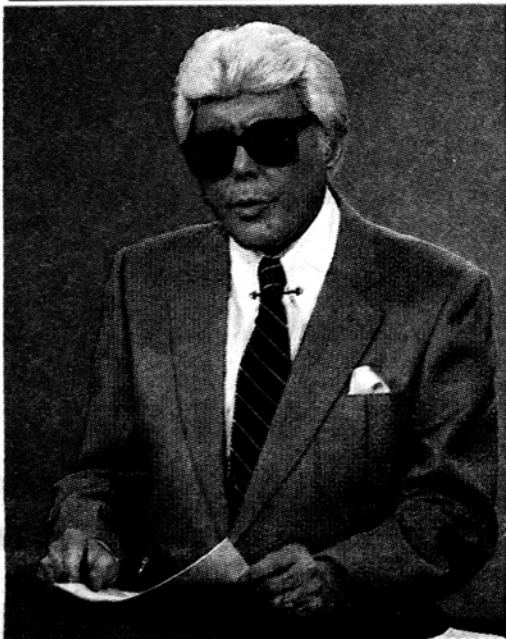
MAY 1989

ONE SECTION

© 1989 Liberty Media Inc.

The Newspaper for Dallas Residents  
in the Prime Of Their Lives

INSIDE



Geary G. Broadnax

**10 Media star**

Broadcast stardom doesn't sway Marvin Zindler. He's too involved in championing the cause of the down-trodden.

**8 Cholesterol**

Half of all adults are at risk due to high cholesterol. But a few simple steps can often remedy the problem.

**4 Sandwiched**

More women than ever are assuming the role of Middle Mom, balancing time between older and younger generations.

**2 Insurance**

Changes in the Medicare program are prompting companies to redesign their supplemental coverage policies.

# Protest strategies

## Health bill faces two-pronged attack



Steve Krauss

Bethany Knupp, left, and Debbie Davis of the Dallas Clown Ministry take more than laughter to Dallas-area hospitals.

# Send in the clowns

### A good laugh may be what the doctor orders

By **Herbert P. Weiss**

A 6-year-old girl lies in a hospital bed, waiting her next cancer therapy treatment. Her mother sits nearby, trying to hide her worry. The mother reaches to straighten her daughter's pillow. Suddenly, the girl's eyes widen, she sits up, brightening the room with a sparkling

smile.

Enter the troupe from the Dallas Clown Ministry, a group of light-hearted volunteers whose antics bring heavy-duty relief to patients at area hospitals and other health care facilities.

Their routines of magic, mime,  
See HUMOR, Page 8

## CRITICS CALL FOR REVAMPING PHYSICIAN FEES

(Continued from Page 1)

system is physician payment reform."

A special commission formed by congressional mandate in 1985 — headed by Dr. William Hsiao, professor of economics and health policy at Harvard's School of Public Health — makes three key recommendations which drastically impact the way Medicare pays its bills.

If approved, Medicare would establish a fee schedule for each medical procedure. This would cover all medical specialties, including radiology and anesthesiology. Fees for physicians would be based on what are termed "resource costs," such as the type of work a doctor performs and the cost of maintaining a medical practice.

Presently, Medicare pays an approved amount of a doctor's bill based on the lowest customary, prevailing or reasonable charge in a specific geographical area. Thus, if a Dallas doctor charges \$50 for a particular procedure, but other physicians in the area charge \$40, the lower figure becomes the base fee used by Medicare to determine their approved charge.

In the view of Karen Davis, professor

and chairman of the Department of Health Policy and Management at the Johns Hopkins University in Baltimore, "The system is inherently inflationary, inequitable among physicians, and inordinately complex and difficult to understand and manage."

Rep. Fortney (Pete) Stark (D-Calif.), chairman of the Ways and Means Subcommittee on Health, says it amounts to giving doctors a blank check.

Limits would be placed on the "balance billing" charges of physicians. Medicare pays only up to its approved amount; doctors bill patients for the difference. A House Aging Committee report estimates that in 1998 beneficiaries paid an average of \$2,394 in out-of-pocket costs for this form of extra billing.

National expenditure targets for doctor's services payable under Part B would be set. Increases in the Medicare fee schedule would be tied to these targets. Depending on the volume of services doctors provided, their fees could go up or down. The intent, Davis says, is to give doctors incentives to limit services.

The American Medical Association sees this as a form of rationing health care and is vigorously opposed to targets.

Expenses under Part B represent 40 percent of all Medicare outlays, close to \$35 billion in FY 1988. Of this amount, physician fees represented \$24 billion, almost two-thirds of all expenditures.

## Putting a scale to costs

One of the strongest proposals Congress is examining to bring under control doctor's costs — Part B Medicare costs — is the development of a Resource-Based Relative Value Scale.

The resource base is defined as: 1. work performed by a doctor for a particular service or procedure; 2. overhead costs, including liability insurance; and 3. education costs to become a qualified specialist.

Doctor's work is further defined as 1. the time it takes before, during, and after the service; 2. mental effort and judgment; 3. technical skill; 4. physical effort; and 5. stress due to

risk.

The scale was developed by a team of specialists led by Dr. William Hsiao, professor of economics and health policy at Harvard's School of Public Health. The study by Hsiao and his team was mandated by the Consolidated Omnibus Budget Reconciliation Act of 1985.

To carry out the study, a team of experts was assembled from the fields of economics, medicine, statistics, psychology and survey sociology, along with support from the American Medical Association and 30 other specialty societies. ■

And by 1994, Part B alone will cost more than \$80 billion a year. That amounts to almost what the entire Medicare program costs today.

Politically, it would be impossible to ask Medicare beneficiaries to pay more than they now do to cover the growing costs or to use less services. Part B is voluntary, but about 97 percent of all Medicare beneficiaries sign up for the program. Seventy-five percent is funded by general revenues. The balance comes from monthly premiums paid by beneficiaries. In addition, beneficiaries pay deductibles, co-payments, and now have the added cost of catastrophic health insurance.

Frank Delay, board member of the American Association of Retired Persons, suggests Congress should examine carefully the impact any Medicare reimbursement change will have on beneficiaries.

"When you hear about payments for certain procedures or services, or in certain areas, being raised or lowered by 10 percent or 20 percent, you should recognize that you are making similar changes in co-insurances," Delay advises. ■

Cheryl M. Keyser is based in Washington, D.C., covering national legislative issues affecting mature people.

# At Classic Residence, you'll never walk alone.

A step up in retirement living.



It's a place where you'll be with neighbors who aren't exactly shy and retiring. An inviting, involving rental community for seniors that opens this Fall in Dallas.

Here you can choose your own lifestyle. You're free to relax in the comfort of an apartment you'll furnish yourself.

But when you feel like getting out and

taking a brisk walk, you'll find plenty of friends to keep pace.

You'll also find friends to join for delicious meals in the dining room. Or cook up something nice in your own kitchen, for yourself or guests.

Classic Residence™ offers luxury and activity. Security and peace of mind. With management by an affiliate of Hyatt® Hotels. People who are

recognized for their attention to detail and personal service.

So give us a call at **691-7612**. Or stop by 5455 La Sierra Drive, just east of Central Expressway between Walnut Hill and Meadow.

We'll tell you more about a community of people who just won't take retirement sitting down.

