

# STATE NEWS WEEKLY SUMMARY CONTINUED

(the staff) should do what they can to help parents and guardians (the adult payees) get on their feet to do just that—feed and help their dependent children.

Health care, child care and transportation are still large stumbling blocks for many of these families. "And we shouldn't overlook the number one reason why most of these families come to us for help," Miller said. "It's the absent parents' failure to pay court-ordered child support to care for the children they helped bring into this world. Our staff, along with contracted services from district attorneys and community action agencies, are really working to get a handle on getting absent parents to pay."

—OKLA. DEPT. OF HUMAN SERVICES  
05/02/96

## COMMUNITY FOUNDATION FUND REPORT

■(OKLAHOMA CITY) The Community Foundation reports the following activity in the Mayor's Disaster Relief Fund as of April 26. Since the last summary on April 19, \$1,092 in contributions were received. Additional expenditures of \$20,073 were made, including \$710 for auto loss, \$1,081 for medical expenses, \$1,092 for housing expenses, \$691 for living expenses, \$2,490 for counseling expenses and \$14,008 for the Memorial Services.

Contributions to the fund now total \$2,197,868. Expenditures total \$1,703,627. Remaining funds total \$494,241.

—CITY OF OKLAHOMA CITY  
05/02/96

## MEDICINE

### BILL COULD ADD ADDITIONAL MEDICAL LICENSURE

■(GIT) With a vote of 41 to 5, Senate lawmakers passed a bill Tuesday requiring doctors and surgeons providing medical services through electronic means, including phone lines and computer access, to meet medical requirements established by the state. The requirements come as part of the House Amendments to the bill, also adopted Tuesday.

**SB745**, by Sen. Don Williams, D-Balko, would require in-state and out-of-state doctors who provide diagnosis or treatment to a patient within the state to meet requirements established by acts regulating osteopathic

(D.O.) and allopathic (M.D.) medicine.

Sen. Mike Fair, R-Okahoma City, opposed the measure, calling the measure "a ball and chain."

"Telecommunications is changing so fast," he said. "We should wait to see if there is a problem before we start restricting things."

Okahoma Medical Association Executive Director Mike Sulzycki said the measure provides a "comfort factor" for patients receiving their services through telemedicine.

Also under the bill, anyone falling under its provisions is subject to the jurisdiction of Oklahoma's courts in related legal matters. Sulzycki cited a situation at one California HMO, whose X-rays are examined by radiologists in Asia. If the information used by the Asian radiologists resulted in legal action in Oklahoma, those radiologists would be subject to Oklahoma law.

On the whole, Oklahoma medical licensure requirements are not "altogether different," from other states, Sulzycki said.

Gary Clark, executive director, Oklahoma Board of Osteopathic Medicine, agreed with the statement.

"As a practical matter," he said, "when a person seeks licensure in Oklahoma we re-verify their credentials — you don't get a license in Oklahoma just because you had one in Texas."

The Williams bill falls in line with that theory of not supporting reciprocal licensure, a practice not subscribed to by the medical profession, Clark said.

Sulzycki said the measure was not only timely, but necessary because of the rapidly changing nature of telecommunications and its role in the medical field.

The bill does not apply to "irregular" consults.

Also in the measure, a provision exempting from the Oklahoma Osteopathic Medicine Act any commissioned medical officer of the U.S. armed forces, U.S. Public Health Service or the Veterans Administration of the United States. If the medical officer already holds an osteopathic medical license, then they shall be subject to the measure.

The bill's next stop is the governor's desk.

—BRANDON BEARD  
04/30/96

*"Gossip needs no carriage."  
Russian proverb*

### MEDICAL SAVINGS ACCOUNTS PRODUCE OPPOSING VIEWS

■(GIT) Currently, changes are taking place in the American health care system. Some of those changes could include the implementation of Medical Savings Accounts (MSAs). Accordingly, Oklahoma Congressman Don Nickles is urging others in Washington to join him in the adoption of legislation permitting the establishment of MSAs. However, John Burry Jr, chairman and CEO of Blue Cross and Blue Shield of Ohio, said that programs such as MSAs "pose a danger to the entire health care system."

Burry said that proponents of MSAs believe that individuals will act "wisely," when purchasing their own health care, and that, "overall national spending will drop dramatically."

Burry explained that although MSAs would be a "financial windfall" for approximately 70 percent of Americans, it would only benefit those who are relatively healthy. "For these people, the vast majority of Americans, an annual \$3,000 MSA paid by their employer would amount to a yearly \$2,000 tax-free bonus, for the rest, MSAs would turn the cost of health care and insurance into a living nightmare."

Others concurred with Burry's comments. Bruce Vladeck of the Health Care Financing Administration, agreed that MSAs were a "terrible idea." Adding, that MSAs "would only exacerbate the problem of private health insurers seeking to cover only people in good health."

Nevertheless, Nickels said MSAs would provide choice and flexibility. "Medical savings accounts give individuals and families more control over their health care dollars, and when you spend your own dollars, you spend them more wisely than you would spend company dollars or government dollars."

"The present tax code discriminates against individuals who do not have a generous employer. Today, employers can deduct up to 100 percent of the cost of health insurance for their employees, but self-employed individuals can deduct only 30 percent and unemployed individuals can deduct nothing," Nickels explained. "This medical savings provision will extend favorable tax treatment to persons who wish to purchase a MSA, regardless of their employment status."