

# Medical Breakthrough – Overdue

Speech by Patricia LaMarche  
Green Independent Candidate for Governor  
at Husson College in Bangor, Maine  
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Good Morning. It is exciting to be here this morning as we launch what will hopefully be the first of many wonderful ideas to be featured by candidates all across the state of Maine this election year.

Of all the things Maine needs right now, two stand out as the most important. First, Maine needs solutions and second, Maine needs leaders to implement those solutions.

Some ideas seem to come out of nowhere. We hear about the Beatles writing “A Hard Days Night” overnight, and we marvel at the genius required to conjure something so new and remarkable so quickly.

Some ideas come from our past. When these ideas are brilliant, when these ideas are effectively implemented elsewhere, when they are tried and true and assets to the communities they serve, it’s a tragedy to see them languish unused.

That’s where we are today. You see before you the reports of one healthcare commission. One of many. We got these copies from the Maine State Law Library. The state spent a lot of money commissioning these reports and for the most part they sit unused in the library waiting to be read.

Well, we’ve read them. We’ve read these reports and the others that followed. This Maine Healthcare Reform Commission also known as the 1995 Blue Ribbon Commission is great reading! It is full of data, full of brilliance, full of recommendations to improve the health of Mainers. It’s full of ways to improve access to healthcare, payment for services, and quality of services.

Its not the only commission report, there were several others to follow. And these studies aren’t cheap. One report, at this time still incomplete was discontinued because the state ran out of the money to pay for the study. That one incomplete and I believe, redundant report has already cost \$80,000.

Its time to dust off these reports and put them to work. We need to stop investing in new studies that say the same thing that the old ones did. Its time to stop investing in studies and start investing in Maine.

Over the next several months, we will be detailing the recommendations made by the 1995 Blue Ribbon Commission on Healthcare Reform.

Now, the hardest thing about reforming healthcare is the complexity of the issue. I like to speak in simple terms; but our healthcare system in Maine and across the country is anything but simple. That's why the stack of papers here is so high. In fact, that's one of the observations made here, it's all way too complicated. But it doesn't have to be.

So here's the first dose of medicine that we are going to take to get Maine on the right track, to get our people healthy, and to reap economic success.

We want to implement the Maine Healthcare Authority. Maine has many oversight boards that duplicate many of the efforts done by other departments of the state. This is wasteful and impractical. If we are ever going to get a handle on Maine's healthcare needs, we must put all the participants under one umbrella.

The Healthcare Authority would have many jobs. As recommended in the Maine Healthcare Reform Commission's Advisory Committee on Governance and Administration's final report: the Healthcare Authority would oversee access, financing and cost containment, benefits, and accountability and quality assurance.

This really is no surprise, as these were the original categories that the commission was instructed by the legislature to examine.

But you put 15 smart people together and tell them to come up with ideas to fix a problem, and quite often you get more ideas than you expected. The Advisory Committee, here in its final report, made four additional recommendations.

Today we take the first step toward making their recommendations come true. I'm going to quote the report here, 'Appropriate provider training opportunities need to be available in order to ensure an adequate supply of health care providers. The state, educational institutions, and providers have a role in creating such educational opportunities.'

Adequate access to healthcare in the state of Maine is dependent upon having an adequate supply of providers. Today we call for a doctoral program in Medicine, Dentistry and Pharmacology.

It is our goal that, by the time the students entering their freshman year in college this September graduate, they will have the option of attending an allopathic medical school, or a dental school, or a pharmacy school right here in Maine.

Last night, just because I hadn't studied enough minute details about medical schools and dental schools and the enormous shortage of pharmacists in our state, I started to google the economic impact on local communities that educational institutions provide. You can do it too, the data is overwhelming.

Kids come from out of town, schools hire every level of worker, from professors to custodians, and local merchants benefit from the influx of capital and demand for goods and services.

But let's get more specific. Inside your press packets you will see in very real terms the money that a medical school will bring to our economy in grant monies alone. The National Institutes of Health allocates money every year to medical schools around the country. Johns Hopkins tops the award total with more than 449 million dollars in investment, while Mercer in Georgia gets the least, with more than 1.2 million.

There are five schools highlighted in your packet. We chose these schools because they had similarities with Maine and because they all started up in the nineteen seventies, about the time that Maine seriously considered having a medical school. As you can see, UMass in Worcester got more than 110 million dollars in 2004. Every one of these schools makes doctors, they increase the number of healthcare professionals in their area, and they bring federal grant dollars back to their state. And they have been doing so for 30 years.

I don't want to go on forever with this, and I want to take your questions, but the dental school and the pharmacy school go hand in hand with this dedication to higher education.

And good dental health makes for healthier people, and for more employable people. Have you ever tried to get a good job without a smile?

Also in your packets are excerpts from an article about four new startup dental schools in the United States. Every one of them began as the first step toward improving dental health in rural areas.

Take your time, look through the packets. It's exciting. Young Mainers with options, druggists making 70 thousand or more in starting pay, rural dental programs available to folks in Maine, many of whom haven't seen a dentist in a decade or more.

If Nevada can start a dental school and Brown University can rebuild their medical program, then what's stopping Maine?

Nothing. At least nothing should.

With the right leadership, nothing can stop Maine. The only thing we need in Maine is the will to make these programs happen.

Our leaders have told us for years that they don't want our kids to leave Maine, but repeatedly we have walked away from programs that would have kept them here. We'll have no more of that.

Today, as we announce this new set of priorities for Maine, it is with great excitement that we start planning for a better tomorrow, a healthier tomorrow, a tomorrow filled with economic recovery. And here's where we begin an election season filled with great ideas.

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For more information about Pat LaMarche and her campaign, please go to [www.pat2006.com](http://www.pat2006.com).