

August 31, 2009

www.lvswr.org

www.district5300.org

www.Rotary.org

Upcoming Programs

Next Week –

September 7,

Dark, Labor Day

September 14,

Richann Bender,

Maglev project

September 21,

Chancellor Dan

Klaich



**Rotarians –
upcoming
Community Service
opportunities**

**Back to School
Shopping –
September 12th**

At JC Penney store
4485 S. Grand
Canyon

8 – 9:30 a.m.

September 17th

**“Happy Feet” –
Ruby Thomas ES**

9:45 a.m. – 10:45
a.m.

**Feeding the
Homeless –
September 30th at**

Christ Episcopal
Church

5 – 7 p.m.



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Did you know that you can make-up for a missed meeting by attending an E-Club Rotary meeting? Just click here to see how http://www.rotary.org/RIdocuments/en_pdf/eclub_list.pdf.

President Doug’s message - Welcome to the Las Vegas Southwest Rotary Club, a club committed to serving those in need whether it be providing food to the homeless, medicine to the sick, new shoes to at risk school kids or clean water to drought ridden villages. Las Vegas Southwest does these things with a passion for improving our community and in the company of good friends.

Announcements:

Rose Bowl Float, on Sunday, December 27th from 8 a.m. to 4 p.m. Fred Fukumoto has 2 open volunteer positions to decorate Rotary’s 2010 annual float in the Rose Bowl parade. This is a great opportunity to help the World see Rotary and the good deeds we do domestically & internationally <http://www.rotaryfloat.org/> . if you are interested in helping please contact Fred at 363-1575 or email @ fredsgwen@msn.com .

GSE Team to Brazil – Adrienne Cox introduced Jer Roberson-Strange, our Club’s applicant for the 2010 GSE team. Jer will be interviewed in September and we wish her well to being one of the 4 non-Rotarian GSE team members.

Back to School Shopping – we will again be taking homeless students from Roger Bryan ES shopping for clothing to start the school year. The JC Penney store at 4485 S. Grand Canyon is partnering with us. We need 1 Rotarian and /or spouse for every student. Please contact Josh Satterlee or Fred S. Fukumoto if you can help. A sign up sheet is being circulated or contact Fred directly.

Start bringing your prospective members to lunch – Bill Goff is encouraging all members that they have someone who should belong in Rotary. Bring them to lunch so that they can see the good work we do and the fellowship we enjoy.

Leave of Absence - Denise Anderson is now on inactive status to our Rotary Club. She is seeking employment, welcomes assistance and looks forward to rejoining our Rotary family soon. She can be reached at 702-810-0000. Her resume is on the Club’s website www.lvswr.org under the Membership tab. Shari Farkas is also on inactive status, her resume can be found at www.sharifarkas.com .

Lion King at Mandalay Bay – Eric Colvin is trying to get a group together for this Disney Musical in mid-October for all interested parties. For more information about **Lion King** go to <http://www.mandalaybay.com/entertainment/LionKing.aspx>

Tailgate – Eric Colvin announced the date of the Club’s Annual Tailgate party, November 7, 2009 vs Colorado State; he’ll update us on more details



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Officers and Directors

President

Doug Beckley

President Elect

Melissa Copeland

Secretary/Treasurer

Aric Graham

Directors

Bill Goff

Adrienne Cox

Keith Thomas

Eric Colvin

Fred Fukumoto

Tom Martin

Immediate Past

President

DeWitt Paul

Advisor

Bruce Pope

Avenue of Service

Chairs

Community Service

Josh Satterlee

Vocational Service

Mark Rowley

Ken Walker

International Service

Mitchell Horst

Jack Pestaner

Club Service- Programs

Joanne Blystone

Troy Lochhead

Events

Karen Strawn

Membership

Bill Goff

Public Relations

Administration

Aric Graham

Foundation

Bruce Pope

Welcome to our Visiting Rotarians and Guests

Rotarians – Mary Westbrook, banking, from the Las Vegas Club

Guests – Craig Ramos, guest of Adrienne Cox

Jer Roberson-Strange, GSE team applicant

David Doto, son-in-law and guest of Howdy Wells

Karen Rubel, banker from Nevada State Bank & guest of the Club, helping to get our bank accounts switched from Community Bank

Member Recognitions –

4 Way Test – Andy Katz came close, with some help by Patty (our server), to reciting the Rotary 4 Way test; Pres Doug asked the 1st table on the right side if it met the 4-Way test; Pres Doug didn't like the answer so he fined Melissa, Keith, Charlie, Adrienne, & Fred \$25 each and Andy \$50. Ted Henderson also was fined \$50 was trying to coach Andy.

“Be proud to wear your Rotary pin” – apparently our President, Doug, forgot this as pointed out by Melissa & Fred and so took a \$50 fine for not wearing a Rotary pin today.

Alternate GSE Team Leader – Pres Doug recognized Adrienne Cox \$100 for “winning” the alternate team leader for next year’s visit to Brazil.

New truck? – Pres Doug interrogated Mark Rowley until he confessed that he bought a new Toyota Tundra, which cost him \$75

Joke of the Day – Scott told a very good joke, which had been previously blessed by Joanne – but not good enough to warrant a credit from Pres Doug

Gifts for the Pres – now that Joanne is back in Las Vegas, she brought some “goodies” from the best bakery in Lake Tahoe.

Our speaker – Joanne Steffen, Executive Director of CareMore Las Vegas spoke to the Club about CareMore, an Medicare Replacement plan:

Their Mission; who they are; how they do it and that they will be opening two facilities in Las Vegas in November. It was very informative – please visit their website www.caremore.com for more detailed information.



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**Rotarians at
work for the Club**

**Invocation &
Pledge**

Adrienne Cox

**Introduction of
Visiting
Rotarians and
Guests**

Doug Beckley

Ms. Mic

Tom Martin

Reporter

Fred Fukumoto

Mystery Greeter

**Anyone Know
who this was?**

Drawing Winner

**Karen Rubel,
guest from
Nevada State
Bank**

Keeping current – Melissa Copeland and Ted Henderson gave a joint overview of the debate over “health care reform”. There handout is printed below:

Here are some thoughts Melissa and I have come up with:

1. Electronic Medical Records and coordination of same with doctors – Specifically, if a member has more than one condition (heart, diabetes, high blood pressure) and sees several doctors, all of whom prescribe different medications, someone needs to know ALL of the meds and their potential for adverse interaction.
2. Quick and accurate diagnosis of a condition with tests to confirm or deny that issue, rather than a whole gamut of varied and expensive tests that run up the expense.
3. As a corollary to the above, often doctors have their own testing facilities, hence refer tests to themselves on a “fee for service” basis, which drives up costs.
4. Acceptance of test results already run by another doctor, rather than ordering tests again.
5. Eliminate the rescission of policies after a medical claim has been filed except when fraud can be proved.
6. Eliminate the pre-existing clause for individual policies – allow the individuals to get insurance, as opposed to seeking care uninsured at the emergency room (the single least cost effective delivery of care).
7. Establish a medical “home” for patients, such as the oft mentioned (but never used now!) family doctor. This is the Primary Care Physician so often referred to in HMOs – this is to establish someone who is familiar with ALL of the medical care a patient receives and can coordinate much of it. (This also refers back to the prescription issue mentioned above.)
8. As a society we need to have thoughtful, civil, discussions about what we need, not shouting matches. Both sides need to tell the truth, not lend themselves to demagoguery.
9. Establish a “Best Practice” and “Best Standards” to be used universally.
10. Consumer needs to be involved – requires that the medical industry (doctors and hospitals) actually posts information concerning number of operations performed, outcomes, etc.
11. Universal coverage MUST be mandated, or it will never happen. This will spread the risk because it brings into the system individuals who do not now have insurance because they don’t need it – think 22 year old males, who believe they are bullet-proof.
12. Ted believes a public option needs to be part of the solution. While the insurance industry says that the free market can do this better, I



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have sold health insurance for 15 years and seen Employee Only premiums rise from \$65 to \$439 (or more!). If the industry can do it better, what have they been doing for the past 15 years?

Problems:

Our current health insurance system is a broken system. The most obvious problem of all is cost. On average, we are presented with double-digit increases for policy renewals. Health insurance costs are a large company expense. Many companies are looking for ways to reduce this expense by either reducing benefits or reducing their contribution amount, if they're able to maintain coverage at all.

On the individual market, healthcare costs have become an exorbitant amount for many families who need coverage, but have minimal income. When a retired couple (not Medicare eligible) has to come up with \$1000 a month for premiums, not to mention costs for prescriptions, etc., there's a problem.

Another big issue is the inability for individuals to obtain healthcare coverage. Anyone with major health conditions will have difficulties obtaining coverage, if at all. The carriers don't want sick people. They only want young, healthy people – the ones that need to utilize health insurance the least. Even if an individual can afford to purchase health insurance at a premium, they may be denied the opportunity if they have diabetes, for instance. The only way an unhealthy person can obtain insurance coverage is to obtain coverage through an employer.

Here's a scenario: A company goes out of business. There's no cobra since there's no plan to stay on. An employee, now unemployed, is pregnant. She now has a pre-existing condition that will prevent her from obtaining coverage. Husband does not have coverage through his employer. The only option she has (as long as she has had 12 months of continuous coverage without more than a 63 day gap) is through HIPAA plans. These plans are offered through all carriers, but have watered down benefits and are ridiculously priced. We've seen recent quotes as high as \$4,000/month. This is a problem.

Another scenario: A low income family has a child. They cannot afford individual insurance. The mother does not work; the father's employer does not offer health insurance. The child is diagnosed with cancer. Even if they could afford insurance, they would now be denied coverage.

Physicians say that they're not being compensated enough. Many are paid on a "fee for service" basis, enticing them to order more services. More services, more fees. This is just one of the many reasons for healthcare premium increases.

Lack of communication is a huge problem. Many times when prescriptions are given out by various doctors, who aren't communicating with each other, there can be problems with prescription interactions, especially if all prescriptions aren't being filled at the same pharmacy. Duplication of tests or procedures is also possible when there's a lack of communication.

Medical Bankruptcies – In 2008 64% of all bankruptcies were caused by medical bills. Of those bankruptcies, 75% of them had health insurance!