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Hospitalizations Rising; Family members with COVID; Executive Regulation

COVID rates and hospitalizations are rising again. I have little confidence in rates (home testing results are not reported). Family members all around me are testing positive. More importantly, 17,000 individuals are currently hospitalized in the U.S., a 16 % increase over the past two weeks. As an at-risk person (my age and hypertension), I continue to wear masks in indoor spaces and avoid large crowds. I also look at this [CDC web site](#) if I am travelling at all. For myself, I am most concerned about Long COVID – a complication which continues to be [poorly understood](#), though it [appears](#) that vaccinations do help? prevent the progression to Long COVID. This connection convinced one of my anti-vaxxers yesterday to agree to get the vaccine. Most children from 5 to 11 years old hospitalized with COVID-19 during the U.S. surge [driven by the Omicron variant](#) were unvaccinated, per a [CDC study](#).

Hanging over this rise in hospitalizations is the political disagreement between countries on world wide vaccines access; [without vaccines for all it is likely that COVID variants will continue to appear](#). The U.S. [could do more](#); AND will continue to try to engage with this issue. In the meantime, we simply [do not know](#) the extent of the danger of some of the new variants. Yet vaccines work but still politicians in the U.S. are [pandering](#) to vaccine skeptics.

Health reform can occur, to an extent, – via executive regulation. The Biden administration is [seriously addressing](#) the issue of medical debt at the executive level (via regulation) as health system reform legislation, for now, is not passing Congress. Another topic that could be, in part, addressed by regulation is the longstanding debate about managed care organizations. The research is clear: they can have a negative impact on [the health of consumers](#) and they cost too much. We've been arguing about it for decades and arguing will likely continue. It is equally clear that the political will to address the issue is simply not there. Much of this issue could be addressed via regulation. AND continues to pursue this topic.

Only legislation can address drug prices. AND continues to focus on [high drug prices](#). [Read this article](#) to see why all Americans need a win on this from Congress.

The polarization on health system reform at a state level was recently on full display with [California](#) opening its Medicaid rolls to older undocumented individuals while states like [Tennessee](#) could see hospitals collapse and many avoidable deaths because it is one of the dozen states that have not expanded Medicaid to cover more low-income adults under the Affordable Care Act (ACA). Let's not forget that the federal government is footing over 90% of the bill for ACA expansion. Combine this challenge that with the fact that when the federal emergency declaration ends, [millions on Medicaid today will likely lose](#) their insurance coverage (and you can feel the impact of the ACA).

The Government Accounting Office issued a [report](#) last week definitively documenting Trump administration political interference with the main federal agencies. More importantly, it detailed procedures on how political interference in their work should be reported and handled. Specifically, as the GAO stated, the CDC "has not defined political interference and does not have a formal process to address allegations of political interference." The National Institute of Health does have a process by which political interference can be addressed. Public trust in public health from organizations such as the CDC can increase only when political interference stops and the public knows about it.

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