

## TeeTime



# AARP negotiates new senior rules

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The AARP has negotiated with the PGA to modify the Rules of Golf for seniors. If you qualify as a "senior," please note the following changes:

Rule 1.a.5: A ball sliced or hooked into the rough shall be lifted and placed on the fairway at a point equal to the distance it carried or rolled into the rough with no penalty. The senior should not be penalized for tall grass, which groundskeepers failed to mow.

Rule 2.d.6 (b): A ball hitting a tree shall be deemed not to have hit the tree. This is simply bad luck, and luck has no place in a scientific game. The senior player must estimate the distance the ball would have traveled if it had not hit the tree and play the ball from there.

Rule 4.c.7 (h): If a putt passes over a hole without dropping, it is deemed to have dropped. The law of gravity supersedes the Rules of Golf.

Rule 5: Putts that stop close enough to the cup that they could be blown in, may be blown in. This does not apply to balls more than three inches from the hole. No one wants to make a travesty of the game.

Rule 6.a.9 (k): There is no penalty for so-called "out of bounds." If penny-pinching golf course owners bought sufficient land, this would not occur. The senior golfer deserves an apology, not a penalty.

Rule 7.g.15 (z): There is no penalty for a ball in a water hazard, as golf balls should float. Senior golfers



should not be penalized for manufacturer's shortcomings.

Rule 8.k.9 (s): Advertisers claim that golf scores can be improved by purchasing new golf equipment. Since this is financially impractical for many golfers in these times, one-half stroke per hole may be subtracted for using old equipment.

Please advise all your senior friends of these important rule changes.

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Recently, Bob Tway had a decision to make: Family or the FedEx Cup. Bob chose his son, Kevin.

Tway, 49, with eight Tour victories on his resume, was ranked 119th in the FedEx Cup points and had a spot in the Barclays tournament. He also had a possible spot available in the Deutsche Bank the following week.

When Kevin, 20, the 2005 U.S. Junior Champion and a sophomore at Oklahoma State, won his first match, his dad withdrew from the Barclays, canceled the private jet that he had on standby and got ready for two rounds on a Thursday in his new job as caddie.

"This is much more important to me," Bob said.

However, Kevin Tway lost to Derek Fathauer in a 22-hole match in the round of 16.

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The following questions were sent to me. This one from Ralph Lott:

**Q:** "I hit a ball into an area clearly delineated as 'ground under repair' (GUR). I marked and lifted my ball and determined my 'nearest point of relief' using my 7-iron, as it was the club I planned to use for my next shot. Then, to measure my one club length relief from

that point, I switched to my driver and properly dropped my ball. Did I proceed correctly?"

**A:** Yes. Remember, you must use the club you would have likely used for your next shot in determining your "nearest point of relief" but you can use any one of the 14 clubs in your bag to measure a club length.

This one from Marge Pine:

**Q:** "I hit a nice drive right down the middle of the fairway, only to find that my ball somehow came to rest against a large un-replaced divot. Can I remove the divot without penalty?"

**A:** Yes. An un-replaced divot is considered a loose impediment, so you may remove it. However, you should be aware that if your ball moves because of the removal, you will be penalized. Wouldn't it have been nice if the golfer who created the divot had shown proper etiquette and replaced the divot!

Finally, from John Wiznicki:

**Q:** "I hit a drive that rolled into the rough and near a clumpy area of long grass. As I addressed my ball to prepare for my next shot, I accidentally caused it to rock out of position. However, the ball rocked back and came to rest back where it started. Should I be penalized for moving my ball?"

**A:** A golf ball that ends up in the same place where it started has not, by definition, "moved." So no, there is no penalty.

Hal Lenobel was a member of the United States Golf Association Rules and Tournament Committee for 25 years. He officiated at more than 150 tournaments during his tenure.

## Staying Alive



# Comparing McCain, Obama health care plans

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American health care is an ongoing train wreck, but don't expect sensible media attention to presidential plans for its reform. Differences between employer-mandated private and public plans versus tax exclusion of employer health insurance by refundable tax credits will not excite the electorate. Sound bites that little or no notion to do with candidates' position will continue to replace informed debate.

Which is very unfortunate. There are major differences between the McCain and Obama health care plans with implications for almost every American. Yet the political will for change, in the teeth of opposition from a gigantic medical industrial complex, is simply not there. A nation, which spends twice as much money per person as anywhere else in the world only to produce the health statistics of Cuba and Lithuania, requires reform. But sadly, the plans of neither presidential candidate will survive lobbyist opposition.

### The McCain plan

The McCain plan addresses a major inequality in present day health insurance — tax deductions for employer-paid insurance. If you are a hedge fund manager you can create health care insurance to cover all your health care costs, which the government will take off your taxes.

McCain's plan would replace employer insurance with a tax credit of \$2,500 for individuals, \$5,000 for families. The uninsured would get tax credits to buy health insurance, and market competition would lead to better, more substantial coverage. Medicare would shift from fee for service to "bundled" services paid at a fixed fee.

Sound familiar? Remember when HMOs were going

to single-handedly rescue American health care? Market solutions have recently worked to perfection in other arenas, like our mortgage meltdowns, the failure of Bear Stearns and IndyMac, and the drying up of credit for worthy businesses.

What will your \$2,500 buy? If you're young and healthy, some coverage with a large deductible. If you're unhealthy, not much. Medical insurance will still cherry pick off the unhealthy and "insure" those without medical problems.

In the 1880s, Germany figured out that a healthy economy, and most significantly a healthy army, required a healthy population. You insure everybody so that the healthy help cover the unlucky and unhealthy. You boost national production, create equity and improve life for all.

The McCain plan would create coverage for the uninsured only in theory. If you become chronically sick, you'll really be stuck.

### The Obama plan

Sen. Barack Obama's health care plan appears to provide something for everyone. Employers will still have to pay something, but can either offer private insurance or pay a federal tax. There will be a new government health plan something like Medicare plus a new "insurance exchange" for those who can't buy group health insurance. Cherry picking of sick patients with preexisting conditions would be outlawed.

As Hilary Clinton pointed out again and again, Obama's plan does not cover everyone. There is no "mandate." Presumably the government health plan would cover many of the uninsured. More money would go into information technology and prevention protocols, but there's no clear way how all this might get paid for.

### The problem of money

At present, American health care costs 15 percent of GDP while failing to cover one sixth of the population.

Most developed countries spend less than half that percentage of GDP, cover all of their populations and show far better national health outcomes. A recent British study had the bottom fifth of British wage earners looking more healthy than the top fifth of well-insured Americans.

As shown by the sudden national adoption of Gardasil, the cervical cancer vaccine of unknown long-term efficacy, American health care payment is driven not by health issues but by lobbyists. American physician incomes derive from how much they use procedures and high technology benefiting large Wall Street firms that effectively lobby Washington, while general physicians, the bedrock of care everywhere else in the world, are paid the least. Preventive measures possess no clout when insurance companies see their paying clients shift year by year. Thirty percent of American costs go to administer thousands of separate insurance schemes whose rules seem to change by the day, while most developed countries spend 5 percent to 8 percent.

Much like the high price of oil, the extreme costs of American health care act as a general tax on the economy. We can't afford the wasteful health care we have now, and with an aging population, won't in the future. Where's the money going to come from?

The answer is to ask what health care is for. Should we continue to provide the vast majority of Big Pharma's national profits, and allow 30 percent of costs to go to insurance companies to administratively deny health care? Or should the market allocate our health care dollars to travel agents and Singaporean cardiac surgery departments, whose IT is head and shoulders above that found in American hospitals?

Health is about far more than health care. It's about how we live, how we educate our population, how we eat and move. It is intimately connected with three diminishing resources — food, energy and water (FEW)

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