2008春季高口阅读第一篇详细评析 PDF转换可能丢失图片或格式,建议阅读原文

https://www.100test.com/kao_ti2020/499/2021_2022_2008_E6_98_ A5 E5 AD A3 c95 499944.htm 今年高口阅读第一篇文章是社 会话题,具体的来说,是社会医疗福利制度的话题。本文主 题将焦点对准"强制医疗保险的利与弊"这个open issue 上, 注定了这篇文章以探讨为主,作者的观点会比较明确,但是 解决方案会比较模糊。本文与新东方口译课堂上我们详细讨 论过的"美国枪支持有"问题的文章,结构、观点上都有相 同之处。According to legend, King Canute of Denmark facetiously tried to stop the rising tide by simply raising his hand and commanding the waters to roll back. The tide, of course, kept rising. Yet (主题开始) policymakers throughout history have followed Canutes lead. From Hillary Clinton and John Edwards to Mitt Romney and Arnold Schwarzenegger, politicians across the spectrum have tried or vowed to solve Americas health-care woes (主题进一步加强) by enacting an individual mandate--a law requiring every adult to purchase health insurance. Despite its bipartisan support, the individual mandate is bad policy, a vain attempt to command a better result while doing nothing to achieve it. 本段承袭高口文章(也是大部分中高级难度的文章共通的特 点)的"钻石型结构"。即开头铺垫,中间主题(就本文来 讲即双方观点碰撞),结尾补充说明。考生千万不要被开头 的King Canute 吓到,这只是一个丹麦国王,而作者只是在炫 耀历史知识而已。用普通大众(头脑正常的)所不熟知的历 史细节吓唬观众,是中外作家的基本功。如果考生能够循着

事实/论述这个路子来梳理段落结构的话,不难看出,段落的 主题是用一般进行时态(表示一般性的事实)表达出来的。 即红字粗体部分。意思是"决策者经常通过普及(强制)个 人医疗保险的做法解决医疗福利问题"。这里读者应该加强 阅读,或者说从这里开始阅读。在段落结尾despite提示读者 ,作者在加强表达,顺藤摸瓜就能找到bad policy这个关键的 ,表示观点立场的词汇。Individual mandate supporters (立场细 节) typically (明显的错误观点) justify the policy by citing the problem of uncompensated care. When uninsured patients receive health services but dont pay for them, the rest of us end up footing the bill one way or another. So advocates of insurance mandates contend, plausibly enough, that we should make the free riders pay.(错误观点的重复,至此,本段主题确定)本段主题在开头结尾 处用supporters引起读者注意,用typically暗示这段承袭上段依 然是错误观点的表述。而这个错误观点在首段的主题处已经 有所表述,所以,本段在free riders, uncompensated care等处出 现生词的话,可以对照首段的含义参照理解。这一段是gist explanation gist重复的模式。本段主题为"支持普及医疗保险 的人认为人人皆应保险(should make the free riders pay) "。But how big is the free-rider problem, really?(作者的观点很快就要出 现了)According to an Urban Institute study released in 2003, uncompen-sated care for the uninsured constitutes less than 3% of all health expenditures. Even if the individual mandate works exactly as planned, thats the effective upper boundary on the mandates impact. (用让步关系强调作者观点)本段加强了上一段的意 思,并且作者加入了评析。从首句可以看出,通过继续使

用free riders这样的词汇,作者暗示出free-riders问题并未达到 非得用这种极端方式解决的程度。结尾处说,他们的计划最 多也不过尔尔。本段的模式是gist example深入gist 的模式。OF COURSE, IT WILL NOT WORK exactly as planned. As anyone who has ever driven above 55 mph knows, mandating something is not the same as making it happen. Some people will not comply: 47 states require drivers to buy liability auto insurance, yet the median percentage of uninsured drivers in those states is 12%. Granted, that number might be even higher without the mandates. The point, however, is that any amount of noncompliance reduces the efficacy of the mandate. (of course...but 的结构应该很熟悉了)本段结 构同上一段,只是论述更加深入。任何不加入社会保险的人 都会使对方的方案效果减弱,而事实上,不可能全民皆入保 险。None of this means the uninsured are not a problem.(作者观 点全部呈现出来: 双重否定,用来强调未加入医疗保险的公民 同样不可忽视) Yet the true issue isnt that they cost the rest of us too much. Its that they simply get less care than most people (one reason uncompensated care is such a small fraction of health-care spending). And if the real concern is making health insurance and health care available to those in need, we should focus on reducing health-care prices and insurance premiums. The individual mandate is, at best, a distraction from that goal. (仍然不忘进行正反观点 的对比)本段首句说,虽然全民皆入保险不可能,对方的计 划成为泡影,但是我们在不同意对方观点的同时,也关注那 些不能加入保险的人们。段尾指出,我们应该尽可能帮助这 些人加入医疗保险,享受保障。但是如果强制全民保险则南

辕北辙。Some proposals (大众观点,永远是靶子) couple mandates with subsidies for the purchase of private insurance. As far as policies to encourage more private coverage go, you could do worse. But as long as the public has to subsidize the formerly uninsured, the problem with free riders has not been solved. Were just paying for them in a different way. To enact any mandate, legislators and bureaucrats must specify a minimum benefits package that an insurance policy must cover. Yet this package cant be defined in any political way. Each medical specialty, from oncology to acupuncture, will push for its services to be included. Ditto other interest groups. In government, bloat is the rule, not the exception. Even now, every state has a list of benefits that any health-insurance policy must cover--from contraception to psychotherapy to chiropractic to hair transplants. All states together have created nearly 1,900 mandated benefits. Of course, more generous benefits make insurance more expensive. A 2007 study estimates existing mandates boost premiums by more than 20%.这 三段批判了一些其余的社会观点,分析了目前各个州的做法 ,也提出了一些政府决策的原则。If interest groups have found it worthwhile to lobby 50 state legislatures for laws affecting only voluntarily purchased insurance policies, they will surely redouble their efforts to affect the contents of a federally mandated insurance plan. Consequently, even more people will find themselves unable to afford insurance. Others will buy insurance, but only via public subsidies. Isnt that just what the doctor didnt order?这里继续指出 对方观点欠缺的地方,并指出了这样做的不良后果。这里注

意,到此为止,已经有了很多不同的,对于对方观点的表述方式:50 state legislatures for laws affecting only voluntarily purchased insurance policies. insurance mandate supporters 等等。 A better approach to health reform would focus on removing mandates that drive up insurance premiums. States ought to repeal some or all of their mandated benefit laws, (推动研究加强立法永远是作者的解决之道) allowing firms to offer lower-priced catastrophic care policies to their customers. The federal government could assist by guaranteeing customers the right to buy insurance offered in any state, not just their own, enabling patients to patronize companies in states with fewer costly mandates. Indeed, removing mandates would do far more to expand health-care coverage than adding new mandates ever could. 100Test 下载频道开通,各类考试题目直接下载。详细请访问 www.100test.com