

TESTIMONY FOR NOV. 2, 2007 PUBLIC HEARING: HEALTHCARE REFORM

On April 1, 2006 — a sunny, Saturday afternoon — I was stopped astride my bicycle when a young man on a bike, who had just run through a red light, rammed into me full blast. I crashed to the pavement and he sped on. Hours later, at St. Vincent's Emergency Room, I found out I had a severe hip fracture — the neck of my femur had cracked through. At the time, I had no health insurance.

I was an athlete, a health nut, who rarely went to doctors. I thought I could make it to 65 without health insurance. I'd looked into coverage, but, as a self-employed person, the choices were few, ridiculously expensive, and numbingly unclear. I took good care of myself, but, as Fate would have it, I became a victim of a hit and run.

Needless to say, the healing process was an ordeal, but the billing process was worse — a nightmare! Because I made more than the Medicaid cut-off, I was given no mercy — just find a way to pay bills amounting to nearly \$100,000! I liquidated my IRA, incurring the early withdrawal penalty, but that wasn't at all enough. A doctor gave me a little hope when he said: "Don't worry, the state compensates crime victims." However, when I tried to get the required report from the police, they refused. They said getting hit by a bicycle is not a "crime" but an "accident." I didn't qualify. Ah, if only I'd been hit by a car.....

So, once home, my days were spent on the phone, highly stressed, pleading for discounts, questioning every bill, etc. I soon realized this was some kind of obscene game of "Let's Scare the Hell Out of Her and See How Much We Can Get." After weeks of calling, all the office workers knew me, but no dice. Then, slowly some started offering little discounts, longer installment payments, etc. If I asked for a larger discount, sometimes they'd just say, okay. After getting the runaround from the hospital for 4 months to go over my itemized bill, suddenly I was told: "Oh, you're all paid up." Some new regulation, they claimed. I'm quite sure it was more like: she's a troublemaker; we got enough — let's get rid of her!

I'm one of the lucky ones. I lost a lot of my savings, but I didn't have to declare bankruptcy. I didn't get a heart attack from the constant anxiety. Instead of going deep in debt trying to pay the bills at face value, I learned to play the game, but is this anyway to run a healthcare system in the richest country in the world? What kind of human beings train these phone workers to toy with patients' minds and life-savings? How can anybody focus on healing in the midst of this cruel sport?

I began investigating other ways. It didn't take long to realize that a Single-Payer system, such as John Conyers H.R. 676 ("Medicare for All") is the simplest, most cost-effective, most efficient and equitable way to go. A virtual no-brainer.

In single-payer we're all automatically in the same pool — rich and poor, healthy and sick — instead of the current fragmented "system" where insurance companies limit their risks, leaving the most needy to underfunded government programs. Single-payer is not "socialized medicine." The government adminis-

ters payment, individuals are free to choose any private provider and providers can spend more money on services instead of endless paperwork. Federal panels contain costs by setting reimbursement rates and negotiating bulk prices for drugs, as is done by the V.A. and in most all developed countries. No in or out of network, no co-pays, deductibles, pre-existing conditions, etc. No middlemen! Healthcare becomes, as it should be, between doctor and patient.

As for the big bugaboo — how to pay for it? — as outlined in H.R. 676, this can be accomplished primarily by a sliding scale of income tax. Compared to the \$4,800 a year I'm paying for my HIP PPO Select policy, loaded with limits and extra charges, I'd happily pay the projected 4.5% of my income — which, in my case, would amount to about \$2,600 yearly. And this covers all essential medical expenses — doctor, hospital, dental, vision, drugs, mental health, long-term care, etc. — guaranteed for life!

I've found that most people, except executives in the healthcare industry, freely acknowledge the simple superiority of Single-Payer. They just think it's a pipe dream because, of course, everybody knows our great democracy is hostage to the powerful healthcare industry and our elected representatives, who depend on corporate campaign contributions, haven't the guts to rock the boat too much.

Call me a hopeless optimist, but I believe logic and decency can and will win out. The free market is not the answer to everything. The first obligation of health insurance companies is to make profit for their shareholders, which they do best by denying coverage to those who need it. The prime goal of a health system, however, is to help people who need medical care. Government-funded firefighters do not protect people by deciding which fires are profitable to put out. Likewise with law enforcement and the army for that matter, a government enterprise, considered the best in the world, by the way.

The public has been snookered for over 60 years about Single-Payer. It's time to do what's right.

The pathetic system we have today says everything about what's wrong with America: the growing divide between rich and poor, the lust for profits above all, and disdain for others who may need a helping hand. The increasing number of uninsured is draining our economy, sacrificing productivity, competitiveness and our national soul.

Single-Payer, on the other hand, says everything about a country I want to live in — where we all realize it's in our own best interests to help each other live healthier, more productive, prosperous lives AND in a fiscally responsible way!

It will take leadership, fearless and relentless, to bring about real reform. I urge Governor Spitzer to use his considerable skills to unite with fellow governors and fight for Single-Payer healthcare in this country, instead of just trying to throw together another patchwork in NY that perpetuates the current inefficiencies. Let's put our collective wills together and create a healthcare system worthy of this great country. Why should we settle for anything less?