



It would be hard to find anyone who would disagree with the idea that every New Yorker deserves coverage for high-quality, affordable health care. Where there is disagreement is on how New York should get there.

It has become a hot button issue in this year's political campaigns and media headlines have been filled with stories about efforts to enact single payer – or Medicare for All – programs, nationally or at the state level. Here in New York, a recent study by the RAND Corporation examining the New York Health Act single payer proposal concluded such a system *could* be feasible. However, the conclusion was based on a number of assumptions that even the report called “highly uncertain.”

- ▶ New Yorkers – individuals and businesses – would have to accept dramatic tax increases. The proposal would require a tax increase of \$139 billion in the first year alone, a 156% increase in what the state currently collects in taxes, and up to \$210 billion by 2031. These tax increases would be on top of the \$82 billion already spent on health care.
- ▶ The savings from a government-run system would come from reducing the reimbursement rates the state pays doctors, hospitals, drug makers and other providers. Hospitals have already voiced concerns about suppression of reimbursement for providers by state programs and the RAND study noted that as a result of lower provider payments, doctors may relocate from the state.
- ▶ The state would need to receive waivers from the federal government for both New York's current Medicaid program and to include Medicare beneficiaries in the new system, which CMS has said it will not grant.

Even if these assumptions were realized, the impact of moving from our current health care system to government-run health care would be monumental.

Individuals who like their current coverage would lose that coverage. Approximately 56 percent of New Yorkers that have health insurance receive coverage through their employer. All these New Yorkers would lose the coverage they have under a government-run system, while Medicare beneficiaries would lose their coverage, resulting in significant disruptions in care. They wouldn't be able to choose the type of coverage that best meets their needs, and could face longer waiting periods for treatment and would have no guarantee that they could see the doctor or specialist of their choice.

Government-run health care would result in significant job losses across the state, hurting New York's economy and communities.

More than 95 percent of New Yorkers are currently insured. Single payer, or Medicare for All, is not synonymous with Universal Coverage, which we all can support. Our collective energy should be dedicated to ensuring critical funding for our current health care system is maintained and health care consumers can continue to choose the health care they want. We should focus on providing insurance for the remaining 5 percent of New Yorkers who need coverage without devastating the system that provides coverage for everyone else.