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New Coalition Members

The Realities of Single Payer coalition has grown to 144 members!

This week we welcome:

Retired Public Employees Association (RPEA)
Advantage Physical Therapy

Request for Op-Eds

We would like to place Letters to the Editor and Op-Eds over the next six months to control the narrative ahead of the next Legislative Session. The Realities of Single Payer coalition is diverse and made up of members from a variety of sectors, so there are several angles we can address when it comes to Single Payer. For example, we can write about the impacts on:

- providers
- small businesses
- Medicare enrollees
- retirees

Please [let us know](#) if you are able to submit an Op-Ed. We can help with the talking points or provide more in-depth analysis, or even provide a draft Op-Ed based on your preferred angle. We can also help place your piece with a publication.

The Single Payer supporters are amplifying their grassroots efforts through this medium so we must be able to drown out their noise with fact-based information, and most times publications want to hear from local individuals as opposed to a broad coalition.

SP Impact by Legislative District

If you ask your local legislator to discuss the New York Health Act, chances are they may not know the details of how the legislation impacts their constituents. That is why we created these infographics to give them a glimpse at the numbers. Each document lists the jobs at risk, increase in taxes, insured rate and loss in hospital revenue (where applicable).

Find the infographics for your local Senate and Assembly members under the Tool Kit on the Members Only section of our [website](#).

Below is an example of the impact on the 56th State Senate District which covers Monroe County.



SENATOR JEREMY A.
COONEY

56TH SENATE DISTRICT

YOUR DISTRICT CAN'T AFFORD SINGLE PAYER!



26,739

HEALTH CARE JOBS
AT RISK*



\$266,029,190

IN HIGHER TAXES
ON CONSTITUENTS**

95.8%

of Constituents
Already Have
Health Insurance

Source: American Community Survey
(ACS)



-\$5,575,768

IN LOST HOSPITAL
REVENUES***

**PROTECT YOUR DISTRICT.
REJECT SINGLE PAYER.**

Sources: *NYS Bureau of Labor Statistics County Level Data by percentage of district population to county; **Per capita income of district tax impact multiplied by total employment (reported in the American Community Survey by the US Census Bureau), Tax bracket from RAND: An Assessment of the New York Health Act; ***2016 Hospital Institutional Cost Reports Claims and Revenues by relative provider payment rates.

Marketplace Keeps Insured Rate High

New York has surpassed six million enrollees in health coverage through the NY State of Health, the State's official Affordable Care Act health exchange health plan Marketplace. This has helped keep the State's insured rate at around 95% and even higher in most areas of the state outside of New York City.

There are measures underway that will make coverage more affordable as well. Financial assistance is now available to New Yorkers through the American Rescue Plan (ARP) for consumers enrolling in commercial coverage. More than 150,000 New Yorkers are expected to receive increased tax credits – and nearly 120,000 already have. Additionally, the NY State of Health is expanding tax credits to tens of thousands of additional New Yorkers with higher incomes who, before the ARP, did not qualify for financial assistance.

Governor Cuomo recently announced that enrollment for coverage in the state's health plan marketplace will remain open through the end of the year.

Nevada Passes Public Option

Nevada's governor has signed a Public Option into law. The government-run plan would be administered by private health plans, and promises to lower premiums and increase access to care by creating an additional insurance option for residents. Despite its passage, a coalition of doctors, hospitals, health plans and businesses are concerned about the plan's impact on quality of care.

There are three million people in Nevada. According to pre-COVID data, approximately 400,000 people are uninsured, or about 13% of the state population. About 85,000 Nevadans are currently enrolled in the state's Affordable Care Act health exchange.

The Public Option law requires insurers that currently administer the state's Medicaid contracts to bid to offer plans priced 5% less than the benchmark silver plan under the ACA. Ultimately, premiums must be reduced by 15% over a four-year period.

Meanwhile, the law would achieve lower costs by paying doctors, hospitals and other providers less than what private insurers currently reimburse. Doctors in Nevada – which already ranks as the fourth-worst state for doctors to work – are worried the Public Option will worsen health care services, especially in rural areas.

Coverage would begin in 2026. But there isn't any cost information available on the Public Option plan right now. First, an actuarial study must be done. The state also plans to apply for a waiver from the federal government in hopes to help pay for the program.

Realities Resources

Useful Links and Information

[Realities Member Toolkit](#)

[Webinar: Understanding the New York Health Act](#)

[Economic Impact of the New York Health Act](#)

[Webinar: The New York Health Act & ERISA](#)

[New York State 2021 Legislative Session Calendar](#)

[New York Health Act: Cost vs Tax Increase](#)

[Frequently Asked Questions about the New York Health Act](#)

[Myths and Facts about the New York Health Act](#)

[Sample Opposition Memo](#)

[RAND Study on Single Payer](#)

