



*A not-for-profit health and tax policy research organization*

## **“Medicare for All: Protecting Health, Saving Lives, Saving Money”**

**Chairman Bernie Sanders  
Ranking Member Lindsey Graham**

**Oral testimony by Grace-Marie Turner, President, Galen Institute**

May 12, 2022

Chairman Sanders, Ranking Member Graham and senators of the committee, thank you for the opportunity to testify today.

I’m Grace-Marie Turner, president of the Galen Institute, a non-profit research organization I founded to promote affordable, quality health coverage and care for all Americans.

Mr. Chairman, I would like to acknowledge my respect for your tireless work on universal coverage.

While there are different views on how to reach that goal, I believe there are important values we share... in achieving universal coverage... with care that is affordable...protecting quality and choice...and especially a strong safety net for the vulnerable.

Americans ARE frustrated with our system, with millions still uninsured. Those WITH insurance find their coverage costs too much, and deductibles can be so high many say they might as well be uninsured.

But the more government gets involved, the more providers must comply with legislative and regulatory demands instead of innovating to respond to patient’s and families’ needs.

Wharton Professor Mark Pauly finds that the federal government exerts GREAT control over our health sector today...with government controlled and directed spending totaling nearly 80%!

In proposing policy solutions, I believe it's important to begin by clearly defining the problem.

The overwhelming majority of Americans have access to coverage now. More than 30 million people were uninsured, two thirds of whom are eligible for public or private coverage but not enrolled. Among the remaining one third, most are not lawfully present in the U.S.—a problem for immigration and citizenship rather than health reform.

Rather than dramatically expand government's role through new or expanded programs, we need to target solutions to the specific needs of the uninsured, focusing on those in marginalized communities.

Uninsured rates continue to be higher among Latinos and Blacks, people with incomes below the poverty level, and people in states that have not expanded Medicaid.<sup>1</sup> Let's work together to target programs to them.

Medicare for All would mean that virtually everyone would LOSE the plans they have now in exchange for one government-run health plan, including...

- 173 million Americans with employer coverage.
- And 64 million on Medicare, seniors who have paid into Medicare throughout their working lives to have medical coverage when they retire.

Three states—Colorado, the chairman's home state of Vermont, and most recently, California—have shelved their single payer plans. California's proposal would have required the largest tax increase in the state's history -- \$12,250 per household annually -- to meet its potential \$391 billion annual cost.

According to the Kaiser Family Foundation, two-thirds of Americans say they support a plan that would guarantee health insurance for all. But that figure drops to 37% when respondents learn it will raise taxes and eliminate their private insurance. It drops to 26% when people learn they can expect DELAYS in receiving treatment.

**Delayed or denied care can cost lives.** Sally Pipes, who runs the Pacific Research Institute and was born and raised in Canada, said her otherwise healthy Godson went to a Vancouver emergency room with chest pains earlier this year.

Doctors gave him an electrocardiogram and a chest x-ray, but not a CT scan. CT scans are notoriously difficult to get in Canada because equipment is scarce. They sent him home with some pills.

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<sup>1</sup> Assistant Secretary for Planning and Evaluation report on "Tracking Health Insurance Coverage in 2020-2021." <https://aspe.hhs.gov/sites/default/files/documents/2fb03bb1527d26e3f270c65e2bffc3a/tracking-insurance-coverage-2020-2021.pdf>

The next morning, he was found dead in his condominium. The autopsy showed a torn aorta which a CT scan would have detected and which likely could have been repaired.

Evidence abroad shows that Medicare for All would lead to restricted access to new medicines, diagnostics, and treatments, fewer innovations in personalized care and lower payment rates that would force physicians and other providers to curtail services or even close their doors.

We saw that happening right up the street with Providence Hospital that became too reliant on Medicaid's under-payments. It had to close and stop providing acute hospital care after serving the community for a century and a half.

**I would like to commend Ranking Member Graham** for his hard work on proposals to usher in **a new era of health reform** by unleashing the innovation and energy pent up in our health sector.

Sen. Graham has provided ideas and guidance for the work of policy experts from 82 organizations to develop the Health Care Choices proposal that I describe in my testimony. It contains dozen of recommendations to encourage choice and competition, offering more options of affordable coverage while doing a better job of caring for those with the greatest health care needs.

I would welcome the opportunity to work with you to achieve the goals of better access to more affordable coverage and better protection for the vulnerable through targeted solutions. Thank you for inviting me to testify, and I look forward to your questions.