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To: opinion@startribune.com

Subject: Letter to the Editor: Now, More Than Ever...We Need Medicare for All

To the Editor:

[“Worst Week Since 2008”](#) (Mar 21, 2020, StarTribune Business Section). It should have become obvious during the recession in 2008--caused by mismanagement in the financial services industry, leading to an unemployment rate of over 10%--that health care coverage tied to employment is unstable, insecure, and costly. In a matter of days, the economy collapsed, people lost jobs and homes, businesses shuttered; many never to reopen. In Minnesota, the employment-based model, using private health insurance, actually covers only 52% of people in our state. We rely on a number of public programs to fill the gaps and/or purchase of commercial health insurance on the individual and small group market, at great expense to the purchasers and the taxpayers. Even after implementation of the Patient Protection and Affordable Care Act of 2010 (PP & ACA), with an increase in the number of people covered by Medicaid, an improved MinnesotaCare benefit, and taxpayer subsidies for purchase of commercial health insurance, around 4% of us are uninsured, and hundreds of thousands of us cannot afford to use the insurance we have due to the cost of premiums, co-pays, and deductibles. Most people would not be able to afford the co-insurance owed for a serious illness or hospitalization—the amount left after insurance pays. Income eligibility requirements limit the number of people who qualify for Medicaid/MinnesotaCare/CHIP, etc. The amount of debt incurred and the number of personal bankruptcies related to medical debt continues to be a problem.

That was before the COVID-19 pandemic. Leaving aside the indefensibly incompetent, inadequate, dishonest Federal response to this ongoing disaster, we have a public health crisis that is causing an economic crisis, with confirmed cases of COVID-19 and job losses spiking every day. Again, in a matter of days, the economy has collapsed, businesses are closed, layoffs and job losses have spiked, but this time, the health care system is overwhelmed and under-resourced. Congress is trying to get some economic relief out to individuals, families, and business. And, yes, state governors, mayors, local officials, health departments, health care facilities, are working hard to respond to the number of cases, the urgent need for beds, equipment, supplies, and personnel. We have to respond to immediate needs. I get that.

But, what should be glaringly apparent by now is that our fragmented, bottom-line focused acute care delivery system, along with an underfunded primary care and public health system, is insufficient to meet the needs of our people in the best of circumstances and wholly inadequate in a crisis. It should also be apparent that our employment-based model of financing health care, propped up with massive taxpayer subsidies for private insurance and for the public programs needed to fill the gaps, that leaves out millions of low-wage/no benefit workers, contract employees, small businesses, farmers, workers in the “gig economy”, the homeless, undocumented persons, and more, is not working.

The current system of paying for health care in this country is not a system at all. It’s a patchwork that costs too much, does too little, and leaves too many people out. This is inhumane, short-sighted, and unnecessary. Universal, publicly funded and administered health care is a justice issue and also necessary to a secure, productive society. Now, more than ever, we need Medicare for All.