

Campaign FOR THE Minnesota Health Plan



SF 118 / HF 135

mnhealthplan.org
www.gmhcc.org
www.muhcc.org

Single-Payer Health Care for Minnesota

PRINCIPLES FOR HEALTH CARE REFORM

The Minnesota Health Act is driven by the need for a solution that works. To keep Minnesotans healthy and provide the best quality of health care, the Minnesota Health Plan will:

- (1) ensure all Minnesotans receive high quality health care, regardless of their income;
- (2) not restrict, delay, or deny care or reduce the quality of care to hold down costs, but instead reduce costs through prevention, efficiency, and reduction of bureaucracy;
- (3) cover all necessary care, including all coverage currently required by law, complete mental health services, chemical dependency treatment, prescription drugs, medical equipment and supplies, dental care, long-term care, and home care services;
- (4) allow patients to choose their own providers;

(5) be funded through premiums and other payments based on the person's ability to pay, so as not to deny full access to any Minnesota resident;

(6) focus on preventive care and early intervention to improve the health of all Minnesota residents and reduce costs from untreated illnesses and diseases;

(7) ensure an adequate number of qualified health care professionals and facilities to guarantee availability of, and timely access to quality care throughout the state;

(8) continue Minnesota's leadership in medical education, training, research, and technology; and

(9) provide adequate and timely payments to providers.

THE MINNESOTA HEALTH PLAN

- All Minnesotans are included.
- You can go to the doctor, clinic or hospital of your choice.
- The Plan covers all your medical needs including prescriptions, mental health care, dental services, chiropractic.. all your medical needs.
- You cannot be rejected because you have a "pre-existing condition."
- No deductibles or co-pays.
- Premiums on individuals and businesses are based on ability to pay.
- The health plan is administered by a 15 member public board representing you, not insurance company executives. You have a voice!
- The Plan will focus on preventive care and early intervention to keep people healthy and save money.
- We will deliver health care more efficiently by avoiding duplicative hospital investments

LEARN MORE & GET INVOLVED

Campaign for the Minnesota Health Plan
Greater Minnesota Health Care Coalition
Minnesota Universal Health Care Coalition

www.mnhealthplan.org
www.gmhcc.org
www.muhcc.org

What does the Minnesota Health Plan do for me?

The Minnesota Health Plan covers everybody

You get the care that you and your doctor decide on

Your health care is guaranteed

The MN Health Plan is affordable, efficient and simple

The Minnesota Health Plan provides comprehensive care

With the Minnesota Health Plan you choose your doctor

The Minnesota Health Plan costs less

Did you know that:

- 65% of Americans prefer publicly financed health care for everyone.
- 64% of Minnesota doctors prefer such a system, too!
- In the U.S., we spend almost twice as much as Canada and European countries, who provide care for everyone.

Questions?

MUHCC: info@muhcc.org
or 651-641-4073
GMHCC: 1-888-694-5055

THE MINNESOTA HEALTH PLAN

Health Care — A Commodity or a Community Need? by Senator John Marty



*Why not health care for all
Minnesotans?*

*“We could treat
health care as a
community need,
something everybody
needs and everyone
gets – just like police
and fire protection.”*

Health care is bankrupting many families, even those with health insurance. People ask what good it is to have the best doctors if they cannot afford to go to them. Politicians of both parties have been tinkering with health-insurance reforms for years, but that's not solving the problem.

Before deciding how to move ahead, we should recognize that there is a big philosophical divide about how to proceed: Is health care a commodity or a community need?

Many politicians view it as a commodity -- something that is bought and sold in the marketplace. "Bought," that is, to the extent you can afford it. However, if you believe that all people deserve access to affordable health care, as two-thirds of Americans do believe, then there is a problem. Many people don't earn enough to buy health care.

As an alternative, we could treat health care as a community need, something everybody needs and everyone gets -- just like police and fire protection.

If health care were treated as a community need, when you were sick you would get the care you needed. And you would get sick less often, because you would receive pre-

ventive care and health education to assist you in taking responsibility for your health. As with police and fire protection, we all would pay for it, and we all would benefit from it.

In reality, everyone in Minnesota eventually gets health care. If people can't afford treatment, we wait until they are really sick, then we pay for more costly hospitalization and emergency-room care. We end up paying more because people don't have health care up front. We don't focus on prevention. And with our incredibly complex insurance system, about 30 cents of every health-care dollar we spend goes to administrative costs. That is why Americans pay at least 50 percent more for health care than those other nations pay.

Many middle-income families have insurance but are still only one serious illness away from bankruptcy. Our businesses, schools and government face skyrocketing health-care costs.

It is time for Minnesota to make sure that every Minnesotan has access to the health care that they need. By treating health care as a community need, not as an optional commodity, we will live healthier lives and save money, too.

Fixing A Sick System



*Our health system is sick
and needs treatment!*

- 1,300,000 Minnesotans spend more than 10% of their income on health care. And most of those already have health insurance!
- Over 400,000 Minnesotans are without health insurance, because of the cost.
- Nationally, over half of all bankruptcies are caused by high medical bills.
- The U.S. pays half again as much for health care as the average of the ten next most expensive countries.
- In spite of our high expenses, at least 20 countries rate better than the U.S. for life expectancy and infant deaths.
- Compared to Europe, Canada and advanced Asian countries, U.S. citizens make fewer doctor visits and have shorter hospital stays. We do NOT overuse our health care.
- 18,000 Americans die every year for lack of health coverage.
- The savings from eliminating insurance and bureaucratic overhead in our system provides resources to cover everybody.
- Health insurance increased three times faster than workers' earnings, 2004—2007.