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3 **Title: Single Payer System**  
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5 **Introduced by: Harvey W. Halberstadt, MD**  
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7 **Original Author: Harvey W. Halberstadt, MD**  
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9 **Referred to: Reference Committee B**  
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11 **House Action: Disapproved**  
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14 **Whereas, the spiraling costs of the broken health system in the United**  
15 **States are anticipated to exceed the profits of the Fortune 500 companies next**  
16 **year, and**

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18 **Whereas, General Motors states that health care costs are hindering its**  
19 **competitiveness, and**

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21 **Whereas, private insurers seek to insure the healthy and not the sick, and**

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23 **Whereas, a study done by the Lewin Group, a health care consulting firm,**  
24 **estimates that administrative costs consume 20 percent of the total health care**  
25 **expenditures nation-wide, and**

26  
27 **Whereas, there is an enormous amount of paperwork required of**  
28 **American doctors and hospitals that does not exist in countries like Canada**  
29 **and Britain, and**

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31 **Whereas, the United States spent for health care an average of \$6,702 per**  
32 **person in 2004 while Canada spent \$3,165 per person, France \$3,150, Australia**  
33 **\$3,120, and Britain \$2,205, according to the Organization for Economic**  
34 **Cooperation and Development as cited in The New York Times on December 31,**  
35 **2006, and**

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37 **Whereas, a single payer system allows patients to choose their own**  
38 **doctors with the government providing the insurance that encouraged**  
39 **competition among providers, and**

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41 **Whereas, with a single payer system the insurer pays doctors,**  
42 **pharmacists, and hospitals at a preset rate allowing patients to elect being out**  
43 **of the system, and**

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45 **Whereas, unlike a single payer system, the American system has**  
46 **unnecessary costs such as duplicate processing of claims, unpaid claims, large**  
47 **number of insurance products, complicated billing systems, and huge**  
48 **marketing costs compounded by profits and excessive pay and generous**  
49 **benefits to executives of the insurance companies, and**

50           **Whereas, Medicare spends less than two cents of every dollar on**  
51 **administrative costs, allowing 98 cents to pay for medical care, but private**  
52 **insurance companies spend 80 cents of each dollar in premium on medical care**  
53 **with much of the remaining 20 cents spent denying insurance to those who**  
54 **need it (New York Times), and**

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56           **Whereas, unlike Medicare, private health insurance companies have**  
57 **employees cull medical records with the deliberate intent to revoke insurance**  
58 **after purchase on the pretext that the insureds had failed to notify the**  
59 **companies of a pre-existing condition that the insurers were not aware of (New**  
60 **York Times, documentary Sicko), and**

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62           **Whereas, Humana has a staff of physicians to review medical records for**  
63 **medical necessity with the instruction to deny 10 percent of the reviewed case**  
64 **and with the understanding that bonuses are earned if the rejection rate is**  
65 **greater than 10 percent (documentary Sicko); therefore be it**

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67           **RESOLVED: That MSMS support federal legislation for a single payer**  
68 **system modeled upon Medicare.**

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71 **WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE**