

2020 -- S 2385

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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2020

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SENATE RESOLUTION

CREATING A SPECIAL LEGISLATIVE COMMISSION TO STUDY AND ASSESS THE  
IMPLEMENTATION OF MEDICARE-FOR-ALL SINGLE PAYER PROGRAM IN RHODE  
ISLAND

Introduced By: Senators Bell, Quezada, Goldin, Euer, and Nesselbush

Date Introduced: February 13, 2020

Referred To: Senate Health & Human Services

1           WHEREAS, Rising health care costs are a major economic threat to Rhode Islanders,  
2 with health care spending in Rhode Island per person, rising faster than income and greatly  
3 reducing disposable income; and

4           WHEREAS, It is estimated that by 2025, the cost of health insurance for an average  
5 family of four may equal their annual income; and

6           WHEREAS, In the U.S., about two-thirds of personal bankruptcies have been medical  
7 cost-related and of these, about three-fourths of those bankrupted had health insurance; and

8           WHEREAS, Rhode Island private businesses bear most of the costs of employee health  
9 insurance coverage and spend significant time and money choosing from a confusing array of  
10 increasingly expensive plans which do not provide comprehensive coverage; and

11           WHEREAS, Rhode Island employees and retirees are losing significant wages and  
12 pensions as they are forced to pay higher amounts of health insurance and health care costs; and

13           WHEREAS, The state and its municipalities face enormous Other Post-Employment  
14 Benefits (OPEB) unfunded liabilities mostly due to health insurance costs; and

15           WHEREAS, Although Rhode Island significantly expanded health care coverage for its  
16 citizens under the federal Affordable Care Act (ACA), it is not enough. Currently, about 38,000  
17 Rhode Islanders remain uninsured, and even fully implemented, the ACA would leave many  
18 Rhode Islanders uninsured and many more underinsured - resulting in many excess deaths; and

19           WHEREAS, Efforts at the federal level to repeal or defund the ACA, severely threaten

1 the health and welfare of Rhode Island citizens; and

2 WHEREAS, The U.S. has hundreds of health insurance providers (i.e., multiple  
3 “payers”) who make our health care system unjustifiably expensive and ineffective; and

4 WHEREAS, Every industrialized nation in the world, except the United States, offers  
5 universal health care to its citizens under a "single payer" program and enjoys better health  
6 outcomes for about one-half the cost; and

7 WHEREAS, About one-third of every health care dollar spent in the U.S. goes towards  
8 administrative costs (e.g., paperwork, overhead, CEO salaries, and profits) rather than on actual  
9 health care; and

10 WHEREAS, Health care is rationed under our current multi-payer system, despite the  
11 fact that Rhode Islanders already pay enough money to have comprehensive and universal health  
12 insurance under a single-payer system; and

13 WHEREAS, The solution is for Rhode Island to institute an improved Medicare-for-all  
14 type single payer program; and

15 WHEREAS, Single payer health care would establish a true “free market” system where  
16 doctors compete for patients rather than health insurance companies dictating which patients are  
17 able to see which doctors and setting reimbursement rates; and

18 WHEREAS, The high costs of medical care could be lowered significantly if the state  
19 could negotiate on behalf of all its residents for bulk purchasing, as well as gain access to usage  
20 and price information currently kept confidential by private health insurers as “proprietary  
21 information”; and

22 WHEREAS, In 1962, Canada’s successful single payer program began in the province of  
23 Saskatchewan (with approximately the same population as Rhode Island) and became a national  
24 program within ten years; and

25 WHEREAS, Single payer would provide comprehensive coverage that would include  
26 vision, hearing and dental care, mental health and substance abuse services, as well as  
27 prescription medications, medical equipment, supplies, diagnostics and treatments; and

28 WHEREAS, Health care providers would spend significantly less time with  
29 administrative work caused by multiple health insurance company requirements and barriers to  
30 care delivery and would spend significantly less for overhead costs because of streamlined  
31 billing; and

32 WHEREAS, Rhode Island must act because there are currently no effective state or  
33 federal laws that can adequately control rising premiums, co-pays, deductibles and medical costs,  
34 or prevent private insurance companies from continuing to limit available providers and

1 coverage; and

2 WHEREAS, "Public option," "Medicare buy-in," and "state Medicaid buy-in" proposals  
3 all keep intact our administratively inefficient, expensive, fragmented, dysfunctional health care  
4 financing system while merely adding administratively complex options; and

5 WHEREAS, In 2018, Rhode Island House Bill 7285, based on an analysis by Professor  
6 Gerald Friedman of the University of Massachusetts, Amherst, proposed a single payer program  
7 for the state, including a funding mechanism, and this bill has been "held for further study"; and

8 WHEREAS, In 2020, similar legislation will be introduced again in the General  
9 Assembly and will likely again be "held for further study"; now, therefore be it

10 RESOLVED, That a special legislative commission be and the same is hereby created  
11 consisting of eleven (11) members: two (2) of whom shall be members of the Rhode Island  
12 Senate, to be appointed by the President of the Senate; three (3) of whom shall be health care  
13 providers, two (2) of whom shall be primary care physicians, to be appointed by the President of  
14 the Senate; two (2) of whom shall represent employers who provide health insurance to  
15 employees, to be appointed by the President of the Senate; two (2) of whom shall be union  
16 representatives, to be appointed by the President of the Senate; and two (2) of whom shall be  
17 university professors of economics, to be appointed by the President of the Senate.

18 The appointing authority may appoint a member of the general public to serve in lieu of  
19 a legislator.

20 The purpose of said commission shall be to make a comprehensive study to determine the  
21 pros and cons of implementing a single payer program in Rhode Island.

22 Vacancies in said commission shall be filled in like manner as the original appointment.

23 The membership of said commission shall receive no compensation for their services.

24 All departments and agencies of the state shall furnish such advice and information,  
25 documentary and otherwise, to said commission and its agents as is deemed necessary or  
26 desirable by the commission to facilitate the purposes of this resolution.

27 The Joint Committee on Legislative Services is hereby authorized and directed to provide  
28 suitable quarters for said commission; and be it further

29 RESOLVED, That the commission shall report its findings and recommendations to the  
30 Senate no later than one year from the date of passage, and said commission shall expire two  
31 years from the date of passage.

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EXPLANATION  
BY THE LEGISLATIVE COUNCIL  
OF  
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IMPLEMENTATION OF MEDICARE-FOR-ALL SINGLE PAYER PROGRAM IN RHODE  
ISLAND

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- 1           This resolution would create an eleven (11) member special legislative commission
- 2 whose purpose it would be to study and assess the implementation of Medicare-for-all single
- 3 payer program in Rhode Island, and who would report back to the Senate one year from the date
- 4 of passage, and whose life would expire two years from the date of passage.

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