Dear Members of the Health Care Working Group:

On July 7, 2006, the MichUHCAN Board of Directors reviewed the Health Care Working Group Interim Recommendations. The following comments are our responses to the report.

We were gratified that the group embraced the goal of an affordable health care system for all by 2012, but are deeply disappointed with the recommendations which are, ostensibly, meant to get us to this goal. The report failed to outline a set of principles by which a redesigned health care system could be rated. For MichUHCAN, the principles are: universal; accessible; affordable; cost efficient; high quality (produces good outcomes); portable; contains comprehensive benefits (including mental health, long term care, vision, hearing, and rehabilitation services); protection of consumer choice of providers and has portability from job to job and state to state. All of these criteria are able to be quantified and should be a good way to rate any suggested health care reform alternatives. Your report fails to meet most of the above principles and, indeed it is impossible to see how it will actually meet the goal of universality. It is an extremely weak and, at best, incremental approach to health care reform.

We had hoped that your extensive and probably expensive two-year process of listening to Americans would result in bold recommendations to radically change how we finance and deliver health care. In Michigan, I attended several gatherings and the voices were loud and clear about the need to make health care a right and a large majority called for a single payer national health system which we believe will achieve all of our principles. Our voices do not appear to have been heard. Instead we see another fragmented response to an already fragmented system.
We believe that there is plenty of money currently in the system. In Michigan we spend, minimally, $6500 per person. What we need is more health care for our dollar rather than more health care dollars. We must eliminate the high administration costs, obscene profits, duplication of services and other inefficiencies and we should be able to provide everyone with very comprehensive benefits without co-pays and deductibles which add to administrative costs and are a barrier to receiving care. A rationally designed progressive tax could provide the needed dollars and Americans could find off-setting financial relief in not having to pay for health care in the fragmented and administratively expensive way we do today. Our auto insurance, Workman’s Compensation, home insurance etc. would be reduced. We would also not be paying co-pays, deductibles or premiums.

Your report also does not address the debilitating effect our current system is having on our ability to compete in global markets. Large and small corporations are laboring under the stress of health care costs. The auto industry in Michigan is a prime example. Health care must be lifted from the backs of employers. America thrives on competition. We cannot tolerate a health care system that impedes our ability to be competitive in the global market place.

Many of our Board members expressed clear frustration with the inability of our national leaders to stand up to those who hugely profit from the current system and just do what is right for the health of the American people. We hope you, too, will rethink your recommendations and put forth a plan that will actually meet the principles outlined earlier in this letter and also be sustainable for future generations. Health care is no less important than our roads, water systems and the many other services we have deemed important enough to pool our resources as a nation in order that we all may benefit.

We ask that you reconsider your recommendations and formulate a bolder approach to health care reform.

Thank you for the opportunity to comment on your Interim Recommendations Report.

Sincerely,

Marjorie Mitchell
President
MichUHCAN