

To: Senate Committee on Health Care
Date: April 1, 2019
Re: Support for Senate Bill 770

Chair Monnes Anderson, Vice Chair Linthicum, and Members of the Committee,

As a Multnomah County Commissioner and a practicing emergency physician, I am pleased to submit testimony to this committee in support of Senate Bill 770-1.

As an emergency physician, I see on the front line how the health care we provide for people actually plays out in the real world. Emergency Departments are the only providers who are federally mandated to see all-comers, regardless of their ability to pay. Prior to the Affordable Care Act, I would regularly see people at the end stages of preventable or manageable diseases, who did not seek care sooner because of the tremendous cost or the fear of what could happen to themselves or their families. This was a tragic, and avoidable, outcome.

After the Affordable Care Act was enacted, we saw what many in the field of Emergency Medicine predicted -- ED visits increased. Although many more people suddenly had insurance, they did not actually have increased *access* to primary care, so they came to the EDs because they could finally be seen *somewhere* and have their costs covered.

I vividly recall seeing a woman with severe emphysema soon after she received insurance. She did not need to be hospitalized, but she was chronically ill, her breathing troubles had been worsening for years, and she came to the ED because she could finally get the help and medications she needed. I was able to connect her with primary care and a pulmonologist; I only wish she had been able to get connected to care much earlier in her life. This would have prevented the tremendous suffering she experienced and saved the healthcare system a great deal of money.

Expansions in Medicaid eligibility and the Affordable Care Act have moved us closer to universal coverage, but there are still many people in our community who are not connected to the care they need. In Multnomah County, about 16% of people seeking care at the County's health clinics are uninsured. We as a society still pay for this care, but it is not paid for effectively or efficiently. We spend a substantial portion of our limited resources on this care rather than spending much more effectively on upstream social interventions that could help raise up people who are most vulnerable. And the price we pay in the EDs is far too high. People should not have to end up in the place that's least effective and most expensive for dealing with their underlying problems; they should have access to preventive care and chronic disease management that can allow them to thrive to their fullest potential. The percentage of



Sharon Meieran
Multnomah County Commissioner, District 1

uninsured is much lower than it was before the Affordable Care Act, when about 31% of clients at County clinics were uninsured. But 16% of people walking through our community clinics' doors being uninsured is unsustainable, both from a humanitarian standpoint and a financial standpoint.

SB 770-1 would create a Universal Health Care Commission to develop findings and recommendations regarding implementing an equitable, affordable, comprehensive, high quality, and publicly funded health care system for everyone in Oregon based on a single payer model. In February, 2018, the Multnomah County Board of Commissioners adopted a [resolution](#) strongly urging legislative action to achieve universal health care access. A Universal Health Care Commission would enable us to focus and prioritize our collective efforts to achieve universal care, and would be a meaningful step toward addressing the crisis of our deeply flawed, expensive system of care that has truly spiraled out of control.

Thank you for considering this testimony in support of access to healthcare for all Oregonians.

Respectfully submitted,

Sharon Meieran