

Governor Dayton, THANK YOU for your budget initiative to fund a study to compare the costs of single-payer vs. free-market health insurers!

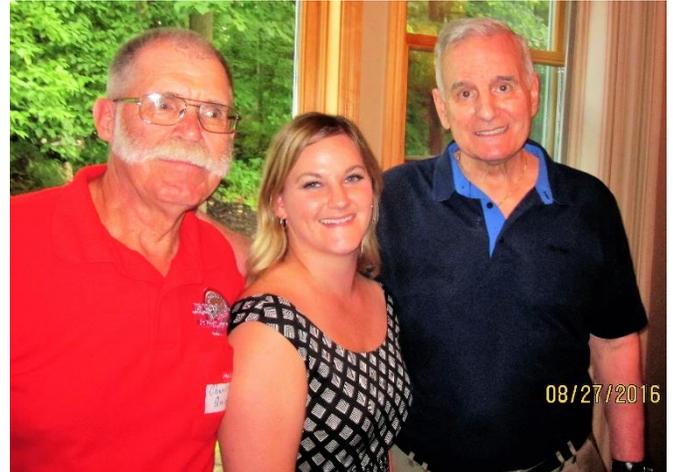
Because the 2017 Minnesota legislature can begin deciding on which of two proposals should be Minnesota's future health care system, Governor Mark Dayton budgeted \$500,000 to fund a study to compare the cost savings of single-payer vs. free-market insurers. The most cost-efficient proposal will merit the State Innovation Waiver, under the Affordable Care Act (Obamacare), to become the future system.

Although the Senate passed the Governor's \$500,000 budget item for the study as part of the Health Care Omnibus Bill, the Conference Committee (comprised of House Republicans and Senate DFLers) failed to vote on that part of the Bill.

One can only speculate on motives for the delay. Are legislators who favor the HMO proposal afraid that it will come in second to the single-payer Minnesota Health Plan in cost savings? Nonetheless, COACT and other single-payer groups will continue to advocate for the Governor's funding initiative.

Meanwhile, COACT endorsed and door-knocked for Erin Koegel (formerly Anderson) who was elected as Representative of House District 37A (Blaine-Coon Rapids). Erin was a teammate at COACT for the Minnesota Health Plan when she was Executive Director for Health Care for All Minnesota.

COACT thanks the Governor after Conference Committee's failure to vote on his initiative



COACT Vice President Charlie Quick (left) and Erin Koegel, newly elected Representative for House District 37A, thanked Governor Dayton for his \$500,000 funding initiative at her campaign gathering August 27. They were joined by other grateful single-payer supporters. Erin will serve us well as a member and leader in the single-payer legislative caucus that COACT is helping to organize for the 2017 session.

COACT Education Foundation praises Neighborhoods Organizing for Change

Since 2009, the COACT Education Foundation, (CEF) has been serving as fiscal sponsor for Neighborhoods Organizing for Change (NOC).

To offer CEF's and COACT's appreciation for NOC's outstanding work, COACT Vice President Charlie Quick and Executive Director Don Pylkkanen attended their annual meeting April 16. There they announced that COACT members and friends will be glad to know about CEF's relationship with NOC and their projects for which CEF has been fiscal sponsor for seven years.

Through their work, NOC embodies social, racial, economic, and environmental justice:

- mortgage modification;
- foreclosure resistance;
- civil rights (including police accountability);
- voting rights;
- employment rights of earned sick days, fair scheduling of hours, and living wages;
- environmental justice.

NOC is a grassroots, member-led organization building power in under-resourced communities and communities of color across the Twin Cities, focused on the intersection of race, the economy, and public policy. Go to www.mnnoc.org to learn more.

CEF was incorporated in 1991 as a 501c3 organization to educate citizens on social and economic justice issues affecting their communities. Issues include single-payer universal health care, family farm survival, local control over feedlot permitting, citizens' authority over environmental review, and other issues. Sharing the same ethic of social justice for all makes CEF a suitable match with NOC to serve as their fiscal sponsor.



Meet NOC members who were elected as Directors of the new Board at NOC's Annual Meeting on April 16.



Governor proposes, Senate passes funding for a study to compare costs of single-payer vs free-market health insurers

Study initiative shows which side of the legislature is serious about reform

Legislators rhetoric on reforming the state's costly HMO system shifted into action this legislative session with one side actually initiating the process to study ways of reducing Minnesota's health care costs, leaving the other side still talking.

In his supplemental budget, the Governor recommended \$500,000 to fund a study to compare the costs of single-payer versus free market insurers, which the Senate passed as part of its Health Care Omnibus Bill. However, the study funding was not voted on in Conference Committee. Thus, the recommendation of a legislated task force calling for a study (see below) was not able to be acted on.

Despite the setback, political support for single-payer is growing as 2017 approaches. That's when Minnesota can apply for the State Innovation Waiver in Obamacare to create its own health care program.

Reforming the state's system can't begin without a study of proposals

Two proposals for the waiver are being readied for legislative consideration. COACT and other single-payer groups propose the "Medicare-for-all" Minnesota Health Plan; whereas the HMO side proposes concentrating HMO power into state-wide Accountable Care Organizations (ACOs). Both proposals must first be studied to determine which one saves Minnesotans the most money to merit the waiver. (See other side on ACOs.)

In fact, a Health Care Financing Task Force, legislated to find ways to reduce cost, could not document savings with ACOs. Therefore, it recommended to the legislature that a study be conducted to compare savings of single-payer with the ACO system and its expansion.

Public concern over rising HMO premiums and deductibles, and record profits of HMO contractors of the state's health programs, is motivating political support for single-payer. So far, 34 legislators are co-authors of the Minnesota Health Plan bill and 36 are co-authors of a study bill. Another 9 and 12 respectively support the bills.

Minnesotans can no longer afford the HMO-run system in the new guise of ACOs which haven't shown they can reduce the state's health care cost, projected to reach \$76.5 billion in 2022.

This makes the full legislature fiscally responsible to enact funding for the study in 2017 when the state can apply for the waiver. Delay beyond this point gives cause for voters to elect candidates in 2016 who will work for real cost-efficiency beyond just talk.

COACT members lobby legislators for a study at Single-Payer Day on the Hill

COACT members joined doctors of Physicians for a National Health Program-Minnesota at Single-Payer Day at the Capitol, March 31. Together they lobbied legislators for the single-payer Minnesota Health Plan and the study bill to compare its costs with the HMO-ACO plan.

Among the doctors was retired physician and COACT member Dr. Dick Peterson, MD, whose visit with his Brainerd area representative revealed the "all talk but no action" position on that side of the aisle. In response to Dr. Peterson's referencing the legislated task force's study recommendation, the legislator used their side's handy excuse that an objective study couldn't be done. And our recommendation for strict criteria (including independent peer-reviewed research) to ensure objectivity was dismissed.



PRESCRIPTION FOR SINGLE-PAYER COACT member Dr. Dick Peterson, MD retired, (left) and Sen. John Marty, author of the MN Health Plan, with Physicians for a National Health Program-MN and COACT at Single-Payer Day on the Hill Mar. 31.

In a follow-up op-ed in the *Brainerd Dispatch* on the legislators' hope for passage of reforms to lower costs through free-market competition, Dr. Peterson asks: "What better next step is there than an independent, head-to-head comparative study [of the proposals]?"

He concludes that those legislators who oppose a comparative study still have the responsibility to explain their free-market position. They need to explain how the ACO option will increase competition in the marketplace since four ACOs have recently merged into two. And how will this give consumers greater choice of providers? Finally, they need to explain why single-payer can't do a better job.