

“NO” on HB 2922

The Affordable Health Care for ALL Oregon Plan

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Mr Chairman, members of the Committee, thank you for allowing me to address you today on proposed HB2922, which would provide free health care to all residents of Oregon, funded by a compulsory system of progressive taxation.

I am a semi-retired general surgeon, and I have practiced in the United States and in the British National Health Service. I am therefore familiar with the concept of so-called free health care funded by taxation, and will not go into the merits of compulsory funding by progressive taxation, which is what this Bill proposes. I would, however, like to point out what happens when freedom of choice is removed and the health care system is run by a government beaurocracy. As has happened in the British National Health Service (NHS). Expect something similar to happen in Oregon.

Firstly, as a patient in the NHS, you have no choice of who provides your medical care, or the care you receive, or indeed, if you get any at all. Wait times to see a Specialist or receive a special test, such as a CAT scan, are measured in months. The results are significantly reduced survival rates for all types of cancer and heart ailments, in large part because of delay in diagnosis, as compared to survival rates in the United States. Arbitrary age limits for advanced therapies, such as chemotherapy and heart surgery, are actually and surreptitiously enforced. Under this Bill, in the hands of an unelected beaurocracy, “best practices” would become the enforcement tool in Oregon.

Secondly, as a physician, a steeply pyramidal and paternalistic training system, fostered by limited budgets, means fewer specialists, and many fully trained specialists, with nowhere to go outside the training ranks, spend many years in junior positions while waiting for a slot to open due to death or retirement. The NHS controls the number of specialists throughout the country, so many see the writing on the wall early, and leave. This Bill would create a similar catastrophe in Oregon, by destroying any incentive for any physicaian to stay here.

Finally, should you, as a patient in the NHS require hospitilization, the chances of receiving that care in a hospital that even approaches the standards of care, efficiency and cleanliness found in ANY hospital in Oregon, are remote. And once the NHS budget for the quarter, or the year, is exhausted, you are out of luck, unless you have a dire emergency, or are politically connected. This is true in the system in Canada also,

incidentally. They "prioritize" who gets care. Under this Bill, Oregonians would be subjected to something similar.

What this Bill, if fully implemented, will accomplish, will be a Statewide "Health Care" system, similar to the nightmare of the British National Health System, bloated with beaurocracy, anti-patient in every way, and simply unaffordable unless severely limited in access. The accompanying predictable decline in the standard of care generally is not what the people of Oregon will tolerate.

I urge the Committee to abandon HB2922 now. Thank you for your time

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