Chair Monnes-Anderson and Committee Members:

My health care story is that I'm now 68 years old. I suddenly found

out I have a heart disease that there is no cure for. However, I can

maintain and remain healthy with diet and lifestyle. Meanwhile the cost of health care goes up every year and I am on a limited income with Medicare, Social Security, retirement savings and some alternative work. My situation is not unique with the broken health care system in the US. Every other rich country provides its citizens decent health care.

So we must:

- End the financial and personal burdens of insurance care
 - Reimbursement for services should reflect the actual cost of the service and should be bundled
 - Providers need transparent and readily available information on quality and cost to move the value equation. As we all know, you can't improve what you don't measure.
- End administrative waste
 - The Institute of Medicine estimated that <u>waste consumed 30 percent of US health dollars in 2009</u>. Donald M. Berwick and Andrew D. Hackbarth, working from a 2011 baseline, pegged the midpoint of reasonable waste estimates even higher, at <u>34 percent</u>. A crude extrapolation of these figures, given the steady rise in overall health expenditures, implies that wasted spending now comfortably exceeds \$1 trillion annually (see Exhibit 1), a sum that could fund the entire Medicaid program twice over.
- End denials of care
 - Many have suffered or even died, because they didn't get the care to which they were legally entitled. And, if we don't fundamentally change our health-care system, there will be many more deaths. Instead of focusing on providing quality care, our system prioritizes shifting costs and maximizing profits.
- Provide transparency
 - Using a healthcare service today is similar to walking into a supermarket, going down the aisle, and as you put things in your cart, other people put things in your cart too; you may not know why or even that they put something in your cart. Then, instead of checking out, you just leave and put the groceries in your car. You drive home and use all of what you picked up. Six months later, you get a bill for the groceries. It's just a single number. You have no idea how much each item costs or even if you received every item being charged for. This MUST change.
- Providers need to organize themselves around what patients need, instead of around what
 providers do and how they are reimbursed. This will entail a shift from individual, discrete
 services to comprehensive, patient-focused care of medical conditions.

Please give all of us here in Oregon a fighting chance to keep healthy and live a decent quality of life by providing Single Payer Health Insurance!
Thank you for your consideration.
Regards
Catherine M. Calvert